

STATE OF ARIZONA
MEDICAL MANAGEMENT CONSULTANTS
SOLICITATION# SCC060004



Date Submitted: November 3, 2005

Submitted by: Lumetra www.lumetra.com

	Offer
TO THE STATE OF ARIZ	
The Undersigned hereby	offers and agrees to furnish the material, service or construction in compliance with all terms, conditions,
	ments in the Solicitation and any written exceptions in the offer. Signature also certifies Small Business
status. Tax Information	
	s) Privilege Tax License No.
Federal Employer Identific	
Location Information	77 ~ 7.8000
Company Name:	Lumetra
Address:	1 Sansome St.
	SAN Francisco, CA. 94104
	SAN THICKSON COL.
Clarification Information	
Name:	KATHRYN LOWEII
Phone:	415-677-8456 Fax: 415-677-2193
Signature	
Name:	BERNARd BASKIN Date: 11-3-05
Title:	Chief Financial Officer
Signature:	Birnard Barkin
Certification - 1	
By Accepting below, the b	idder certifies:
1 The submission of the o	offer did not involve collusion or other anti-competitive practices.
	criminate against any employee or applicant for employment in violation of Federal Executive Order
	rder 75.5 or A.R.S. §§ 41-1461 through 1465
	n, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment,
	discount, trip, favor, or service to a public servant in connection with the submitted offer. Failure to
	affirming the stipulations required by this clause shall result in rejection of the offer. Signing the offer with id the offer, any resulting contract and may be subject to legal remedies provided by law.
4. The bidder certifies that	the above referenced organization $\underline{}$ is \underline{X} is not a small business with less than 100 employees or has
gross revenues of \$4 million	
	Acceptance
The Offer is hereby accep	
	and to sell the materials or services listed by the attached contract and based upon the solicitation, ons, specifications, amendments, etc., and the Contractor's Offer as accepted by the State.
	orth be referred to as Contract No The Contractor has been cautioned not to commence
	vide any material or service under this contract until Contractor receives purchase order, contact release
document or written notice	

State of Arizona Awarded This _____ day of ______ Procurement Officer: _____



One Sansome Street, Suite 600 San Francisco, CA 94104-4448

415.677.2000 Phone 415.677.2195 Fax www.lumetra.com

November 3, 2005

Jamey Schultz
Procurement Officer
Strategic Contracting Centers Agency
Arizona Department of Administration
100 N 15th Avenue, Suite 104
Phoenix, AZ 85007

RE: Lumetra Proposal, due 11/03/2005 Medical Management Consultants Solicitation # SCC060004

Lumetra is pleased to submit a Proposal for the Medical Management Consultants. Per your instructions, the proposal is being submitted in electronic format via the SPIRIT Automated eProcurement System. Lumetra would be proud to assist Arizona fulfill its medical management consulting needs.

Lumetra's relevant past experience, expert staff, and available capacity makes well positioned to provide Arizona agencies with a wide range of timely and highly accurate medical management consultative services to meet the unique needs of Arizona and its residents.

Sincerely,

Jo Ellen H. Ross President and CEO

Cc: Linda Sawyer, Chief Operating Officer, Lumetra

Bernard Baskin, Chief Financial Officer, Lumetra

Kathryn Lowell, Vice President, Business Development, Lumetra



1. Executive Summary

"I consider Medicare beneficiaries fortunate to have an organization of individuals with such talent and commitment to excellence working on their behalf in California."

Nancy Tollison Project Officer CMS Region X Lumetra is a national leader in healthcare, providing advanced medical management consulting services to government and the private sector. Our skilled, credentialed, and experienced medical and analytical staff provide superior services improving the quality, safety, effectiveness, and integrity of healthcare.

Lumetra is pleased to submit this proposal to perform Medical Management Consulting Services for agencies of the State of Arizona. As an organization with more than twenty years of experience improving the quality, safety, effectiveness, and integrity of healthcare, Lumetra is well positioned to provide Arizona agencies with a wide range of timely and highly accurate medical management consultative services to meet the unique needs of Arizona and its residents.

In 1982, Lumetra was formed as an independent, nonprofit organization dedicated to improving the quality, safety, and integrity of America's healthcare system. Based in California and with offices in Nebraska, Kansas, Maryland, and Florida, we provide medical review, medical recruitment, quality improvement, sophisticated data analysis, electronic health record training and implementation, and audit and investigation services. Lumetra promotes better quality of care and protects the fiscal integrity of healthcare programs in the United States. As the recipient of more than 25 awards, Lumetra is nationally recognized for its medical evaluation experience and efforts to assure quality in the healthcare delivery system. The best testament to our success is our steady growth over the last 20 years. In the last five years alone, our company has grown by 90 percent in staff and 180 percent in revenues.

Lumetra is nationally recognized for its commitment to improve quality of healthcare for Californians through expert quality review. Lumetra has consistently exceeded the performance requirements of its customers, and has been awarded eight consecutive three-year Medicare Quality Improvement Organization (QIO) contracts from the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services.

Lumetra has submitted its application for accreditation by URAC as an Independent Review Organization (IRO). In June 2005, Lumetra passed URAC's accreditation desktop audit with a recommendation that URAC's Accreditation Committee grant Lumetra provisional accreditation as an IRO. Lumetra received provisional accreditation in August 2005 and anticipates receiving full accreditation status by the end of 2005.

With a full-time staff of nearly 300 accomplished professionals, Lumetra works with 400 hospitals, 1,400 nursing homes, 600 home health agencies and 25,000 primary care physicians to accelerate the rate of



"Lumetra staff and consultants provide consultation and technical assistance for these offices. supporting the clinical process changes resulting from the incorporation of health information technology in their offices, which in turn will allow them to utilize electronic health records. electronic prescribing, decision support and clinical practice quidelines relevant to their patient population, and electronic billing and communications."

Mark McClellan, MD, PhD Administrator, CMS Speaking about physician practices before the United States House of Representatives' Ways and Means Subcommittee on Health healthcare quality improvement. Since November 2002, Lumetra has successfully responded to and/or processed more than 25,000 medical review cases. As a national leader in medical review, Lumetra is adept at maintaining a cadre of highly respected clinicians throughout the state, including more than 320 credentialed, board-certified physicians actively practicing across 40 specialties and subspecialties. Lumetra's rigorous controls for quality, consistency, confidentiality, and reliability are nationally recognized.

Lumetra is committed to conducting business practices with integrity, competence, and in full compliance with all federal, state, and local laws. Lumetra maintains a comprehensive Code of Business Conduct to provide all personnel with a formal statement of its collective commitment to the standards and rules of ethical business conduct. This Code sets forth standards and guidelines that, along with related policies and procedures, form the basis of our business conduct.

Lumetra, as California's QIO for Medicare, is entrusted with Confidential Information and Data that may be used or disclosed only as authorized by federal statute, regulations, contract clauses, and good business practices. All employees, officers, and directors of Lumetra are fully committed to ensuring the confidentiality of this information. To reflect our high level of commitment, Lumetra maintains a detailed set of Confidentiality and Data Protection Guidelines and Procedures.

To ensure familiarity with its Confidentiality Guidelines, all personnel must sign an Annual Confidentiality Statement. In addition, on an annual basis Lumetra provides all staff with training to better understand their duties and obligations. Furthermore, all visitors, vendors, and contractors who will be exposed to or handling any confidential Information are required to read and/or sign a confidentiality statement applicable to their work with Lumetra.

As an organization with a 20-year history of sound fiscal operations and growth, Lumetra now employs a staff of nearly 300 in six states throughout the country. Lumetra has a proven track record of consistently exceeding performance requirements on government contracts. It has rigorous controls assuring fiscal responsibility on behalf of both evaluators and operations staff. Oversight of Lumetra's financial operations are conducted by the Audit Committee of Lumetra's Board of Directors with an annual audit conducted by a nationally respected independent CPA firm.

Lumetra can enhance the quality, safety, effectiveness, and integrity of care throughout Arizona, ensuring that the state's residents receive the right care, at the right time, every time.



2. Personnel Qualification

Lumetra offers:

- Program Review & Evaluation
- Program Consultation
- Case File Review
- Statistician
- Healthcare Practice Consultation
- Strategic Planning Consultation
- Medical Management Consultation

Lumetra is uniquely qualified to provide the State of Arizona a variety of specialized, high-value medical management consulting services, specifically designed to benefit state agencies and assist them in the achievement of their healthcare goals.

Our highly qualified staff of experts, readily available and sufficient in number, offer a comprehensive and optimal set of skills and abilities required to provide the superior quality service needed for successful fulfillment of the contract's service objectives.

Lumetra consultants have extensive experience and expertise in the development, implementation, oversight, and successful completion of complex projects. By selecting Lumetra consultants, Arizona can be assured that their medical management consulting projects will be managed in an efficient, cost-effective, and timely manner.

Excellent staff performance is a hallmark of Lumetra's experience and business, and this track record of excellence extends to the management of subcontracts and subcontractors. As demonstrated in Figure 1, Lumetra's experts are trained to utilize a comprehensive philosophy in pursuit of outstanding performance.

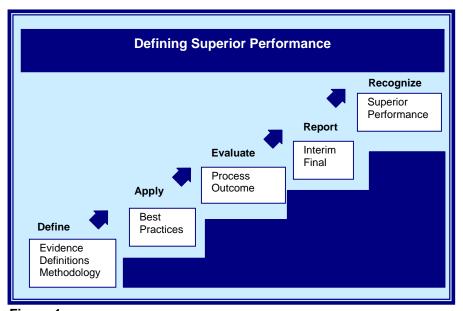


Figure 1

As a result of this commitment, we are proud to report a record of meeting contract deliverables 100 percent on time with superior, high-quality products, services, and solutions. Lumetra welcomes the opportunity to bring this same tradition of excellence to Arizona.



2.1 LUMETRA CONSULTANTS

With more than thirty highly skilled and credentialed professionals, Lumetra is well qualified to perform Medical Management Consulting Services for agencies of the State of Arizona. The Education and Service Category Table below (Figure 2) highlights our staff's educational background and the service categories for which they are offered to Arizona's agencies. These experts will provide a wide range of timely and highly accurate medical management consultative services to meet the unique needs of Arizona and its residents.

Lumetra offers more than 30 highly skilled, credentialed, and experienced medical management consultants!

	Education/ Credentials						Service Categories							
	Bachelor	Master	PhD/Doctorate	RN	МБ	Pharm D	Program Review & Evaluation	Program Consultation	Case File Review	Statistician	Healthcare Practice	Strategic Planning	Medical Management	Healthcare Research
Name														
Mindy Coots-Miyazaki	*	*		*			•	•			•			
Fiona Donald	*				•		•	•	•		•		•	
Kelle Eason	•	*					•			•	•			•
Michelle Fernandez	*	*								•	•			•
Lynn Fiorica	*	•		•			•	•			•	•		
Mary Giammona	♦	•			•		•	•	•		•	•	•	•
Justin Graham	*	•			•		•	•	•		•		•	
Terry Hill	*				*		•	•	•		•	•	•	•
Cynthia Hom	♦				•		•	•	•		•		•	
Sue Jackson	*			•			•	•	•		•			
Dexter Jung	•	•	*				•			•	•			•
Peter Kwok	♦		*			*							•	
Mary Larson	*	•		•			•	•			•			
Ruey-Jiuan Lee	*	•	*				•			•	•			•
Patricia Lin	*	•								•	•			•
Antonio Linares	♦				•		•	•	•		•	•	•	•
Kathryn Lowell	•	•					•					•		
Lanz Lowen	♦	•										•		
Ed Lukawski	•				•		•	•	•		•		•	
Susan Merrill	•	•	•				•			•	•			•
Rita Mistry	•	*					•					•		•
Glen Moy	♦							•						
Bonnie Noble	•	•		•			•	•			•	•		
Sandra Nunez	*	•					•			•	•			•
Rebecca Olson	•	•	•				•			•	•			•
Ana Perez	*	•		•			•				•			
Mary Ralston	•	•	*				•			•	•			•
Fabio Sabogal	•	•	*					•						•
Linda Sawyer	*	•	*	•			•	•			•	•		
Laura Stewart	•	•		•			•							
Merry Tantaros	♦	•		•			•							
Dawn Weathersby	♦			•			•	•			•			

Figure 2



2.1.1 Lumetra Staff Biographies

The following biographical sketches highlight the training and experience of the individuals Lumetra offers the State of Arizona Medical Management Consulting Services.

Mindy Coots-Miyazaki, MSN, RN, CPHQ Senior Project Manager, Home Health



- Program Review and Evaluation
- Program Consultation
- Healthcare Practice

Mindy-Coots Miyazaki has been involved in quality improvement activities for 28 years as a nurse case manager, consultant, project manager and director. As Senior Project Manager for Home Health, she leads statewide quality improvement projects for Home Health, utilizing outcome-based quality improvement methodologies, evidence-based best care practices, telehealth innovations, and transformational culture strategies.

Ms. Coots-Miyazaki is an experienced trainer for quality improvement who has developed and maintained partnerships with professional and trade associations, quality improvement coalitions, and the Department of Health Services.

Ms. Coots Miyazaki holds a master's degree in nursing case management from Sonoma State University. She is a certified professional in healthcare quality and a certified public health nurse.

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Fiona Donald, MD Associate Medical Director, Medical Review

- Program Review and Evaluation
- Program Consultation
- Case File Review
- Healthcare Practice

In her role as Associate Medical Director for Medical Review, Fiona Donald supports and oversees the operations and management of the Medical Review Business Unit, which comprises more than 350 practitioners across settings. She also provides leadership in medical case review determinations through the peer review process.

Prior to joining Lumetra, Dr. Donald held a clinical rheumatology practice in the Inpatient Internal Medicine unit at the University of California San Francisco (UCSF), and was Locum Tenens Physician in rheumatology in medical centers in California.

Dr. Donald serves on the Volunteer Clinical Faculty at UCSF, and has been an Assistant Clinical Professor of Medicine with the UCSF Department of Medicine, Division of Rheumatology and Division of General Internal Medicine. She is the recipient of honors and awards in her field, including the Faculty Teaching Award, UCSF Mount Zion.

Dr. Donald holds a medical degree from McGill University, Montreal, Canada.



Kelle D. Eason, MPH Healthcare Data Analyst III, Scientific Affairs



- Program Review and Evaluation
- Statistician
- Healthcare Practice
- Healthcare Research

Kelle Eason is experienced in the design, data collection, analysis, and reporting of epidemiological studies, and is familiar with various public databases and their applications in epidemiologic research. In her role as healthcare data analyst in Lumetra's Scientific Affairs Business Unit, Ms. Eason is responsible for data analysis in the Physician Office and Managed Care Medicare Advantage plans in California. She also supports the Doctor's Office Quality - Information Technology Project, which works to expedite the adoption and use of electronic health records in physician offices, and the Mediation and Beneficiary Protection project.

Prior to joining Lumetra, Ms. Eason was data manager at the Stanford University/VA Alzheimer's Center, and a research associate at the Medical Follow-up Agency of the Institute of Medicine.

Ms. Eason is a member of the Society for Epidemiologic Research and the American Public Health Association. She holds a master's degree in public health from George Washington University, where she specialized in the study of health education and epidemiology, and a bachelor of arts in psychology from the University of Missouri at Kansas City.

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Michelle M. Fernandez, MPH Healthcare Data Analyst II, Scientific Affairs



- Statistician
- Healthcare Practice
- Healthcare Research

Michelle Fernandez analyzes and interprets a broad range of healthcare data, using analytic results to design and evaluate quality improvement initiatives. She provides evaluation and analysis support to Lumetra project teams working to improve quality of healthcare with physician offices, the Doctor's Office Quality Project, Doctor's Office Quality - Information Technology Project, and underserved beneficiaries.

Ms. Fernandez has diverse experience providing epidemiological and statistical support and working in health policy evaluation and analysis with various public health and private nationwide. Before coming to Lumetra, she held positions as program associate managing strategic healthcare policy and social initiatives with the First Five Commission, and as an epidemiologist with a county-level Department of Health and Human Services, where she developed and initiated a family violence prevention plan, assisted in the development of a food-borne outbreak protocol, and worked with various departments to provide research and study analysis consulting.

Ms. Fernandez holds a master's degree in public health from Boston University School of Public Health, and received a bachelor of science in physiological sciences from the University of California, Davis.



D. Lynn Fiorica, MS, RN Sr. Project Manager, Process and Systems Improvement



- Program Review and Evaluation
- Program Consultation
- Healthcare Practice
- Strategic Planning

Lynn Fiorica has an extensive background in the healthcare arena, with more than 20 years of progressive management experience. She possesses extensive knowledge of regulatory and legislative standards, operational leadership and development, conflict resolution, team building, and process improvement through the application of Lean Methodology.

In her role at Lumetra she plans, directs, and coordinates the administration and management of the Medical Review Business Unit's systems improvement efforts, internal quality development, and safety and risk management.

Prior to joining Lumetra, Ms. Fiorica was responsible for the daily operations of risk management activities at the Kaiser Permanente Medical Center in Vallejo, and directed and supervised operations and system development for medical facilities in California.

Ms. Fiorica holds a master of science degree in healthcare management, a bachelor of science in psychology, and a graduate degree in nursing.

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Mary Giammona, MD, MPH Senior Medical Director, Medical Review



- Program Review and Evaluation
- Program Consultation
- Case File Review
- Healthcare Practice
- Strategic Planning
- Medical Management
- Healthcare Research

Mary Giammona is a nationally recognized leader in case review and an expert in Quality Improvement Organization review of Emergency Medical Treatment and Labor Act (EMTALA) cases. She has extensive experience in the areas of public health programs, health policy, quality improvement, and organ transplants.

As a Senior Medical Director in Lumetra's Medical Review Business Unit, Dr. Giammona recruits and assesses the work of physician reviewers, facilitates meetings requested by hospitals and physicians to discuss EMTALA cases under review, and serves as a resource for QIO Medical Directors and Case Review Managers nationwide.

As senior medical consultant in the Department of Health Services (DHS)' San Francisco Medi-Cal (California Medicaid) Field Office for ten years, Dr. Giammona performs prior authorization of medical procedures, major organ transplants, and Durable Medical Equipment (DME). Her work with DHS Medical Policy Staff has focused on the development of major organ transplant criteria for the Medi-Cal program and review of applications for transplant centers of excellence. Dr. Giammona has also developed the Physician Reviewer Self-Study Guide on CMS' Response Determination Categories, the pediatric audit and review criteria for the National Medical Audit (NMA), and DME policies for service authorization.



Prior to joining Lumetra, Dr. Giammona was director of the Infant Health Intervention Program (IHIP) at the Mission Neighborhood Health Center in San Francisco and an attending pediatrician (physician specialist) at San Mateo County General Hospital. Dr. Giammona is a licensed physician and surgeon, and a Fellow of the American Academy of Pediatrics. She holds a medical degree from the University of California at San Francisco and an MPH from the University of California at Berkeley.

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Justin V. Graham, MD, MS Associate Medical Director, Quality and Informatics

- Program Review and Evaluation
- Program Consultation
- Case File Review
- Healthcare Practice
- Strategic Planning
- Medical Management

Justin Graham provides strategic and operational leadership for the adoption of healthcare information technology (HIT). Dr. Graham was the physician leader for the Doctor's Office Quality – Information Technology (DOQ-IT) Project. In this role he developed a comprehensive HIT curriculum for California primary care providers and continues to consult directly with physicians' offices and medical groups. Dr. Graham represents Lumetra on a number of state and national advisory boards, including the National Quality Forum, the Physicians' Foundations for Excellence HIT Subcommittee, the California State Taskforce on Healthcare-Associated Infections, and the Clinical Working Group of CalRHIO, California's umbrella Regional Health Information Organization.

Prior to Lumetra, Dr. Graham served as a consultant to healthcare providers with Deloitte Consulting, and was the national physician lead for Kaiser's multi-billion dollar Epic information systems installation at 30 hospitals. He was directly involved in the design and validation of Epic workflows and order sets, impacting 30 hospitals and more than 8,000 physicians in the Kaiser system. He also created a strategic plan for a sophisticated healthcare modeling tool designed to analyze and predict outcomes for care management strategies and clinical trials. Additionally, Dr. Graham helped develop a change management tool kit to guide physicians through the difficult journey of healthcare IT adoption.

Dr. Graham continues to practice medicine, providing infectious disease consultation for patients at several Bay Area hospitals, including St. Mary's in San Francisco. He is board-certified in internal medicine and infectious diseases, with medical training at the University of California, San Francisco, and Harvard University. He holds a master's degree in biomedical informatics from Stanford University, where he helped lead an electronic bioterrorism surveillance project sponsored by the Defense Advanced Research Project Agency.



Terry Hill, MD Medical Director, Quality Improvement



- Program Review and Evaluation
- Program Consultation
- Case File Review
- Healthcare Practice
- Strategic Planning
- Medical Management
- Healthcare Research

Terry Hill provides medical management leadership to Lumetra's healthcare quality improvement solutions and services directed to nursing homes, home health agencies, and adult immunization initiatives. In addition to his responsibilities at Lumetra, Dr. Hill is president of the California Association of Long Term Care Medicine and serves on the ethics committee of the American Medical Directors Association. He is also co-chair of the California Coalition for Compassionate Care, a coalition of more than 50 regional and statewide organizations focused on improving care for the dying, and serves on the core faculty of the Stanford Geriatric Education Center. Additionally, Dr. Hill is an assistant clinical professor in the Department of Medicine at the University of California, San Francisco. His research and writing focuses on end-of-life care, nurse-physician communication, and ethnogeriatrics.

Prior to joining Lumetra, Dr. Hill was medical director of Laguna Honda Hospital, a public sector, 1000-bed long-term care facility with acute, skilled nursing, and outpatient services. He was in private practice in Oakland from 1994 to 1999. He has led program development for hospitals and managed care organizations, and he has been medical director of retirement communities, nursing facilities, adult day-health centers, and a hospitalist program.

Dr. Hill earned his medical degree from the University of California, San Francisco.

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Cynthia Hom, MD Associate Medical Director



- Program Review and Evaluation
- Program Consultation
- Case File Review
- Healthcare Practice

Cynthia Hom is board-certified in internal medicine and serves as Associate Medical Director in the PIBS department. In this role she provides leadership planning for PIBS review projects, and supervises the case review work of clinical review specialists and physician reviewers, providing support to ensure adherence to quality levels and schedules.

Dr. Hom is involved in the supervision of all levels of the clinical review of Utilization issues (procedure and/or admission necessity) as well as DRG review to ensure reliable and valid reviews. She serves as a resource for external agencies and CMS staff in all areas of case review (UR/QA), in accordance with Medicare guidelines. She also works on collaborative projects with population-based Quality Improvement unit.

In addition to her responsibilities at Lumetra, Dr. Hom has been a staff physician and associate clinical professor at the University of California, San Francisco, and a staff physician at Palo Alto Medical Foundation,



where she is involved in peer review. Her clinical interests include travel medicine, women's health, geriatrics, and preventive medicine.

She holds a medical degree from the University of California, Los Angeles, a BS in biological sciences with minors in linguistics and psychology from the University of California, Davis.

Susanne Jackson RN, BSN Director, Medical Review



- Program Review and Evaluation
- Program Consultation
- Case File Review
- Healthcare Practice

Sue Jackson provides leadership and guidance to Lumetra's Medical Review Business Unit, ensuring the delivery of services and compliance with case review contractual obligations. She has developed innovative process methods and training materials to handle beneficiary complaints, and to measure beneficiary satisfaction with the process, including mediation and case management. Her extensive program and case review management experience includes the highly visible Medicare Beneficiary Protection Quality Improvement Organization Support Center.

Ms. Jackson has more than 20 years of experience in healthcare management. Prior to joining Lumetra, she was director of Clinical Resource Management at Sutter Health, and director of Case Management and Patient Care Management Services at Alta Bates/Herrick Hospital. She is a three-time recipient of the Outstanding Leadership Award-Hospital Council of Northern and Central California.

Ms. Jackson is actively involved in numerous professional healthcare organizations, including Chair of the Hospital Council Utilization Review/Case Management Committee; Co-Chair of the Hospital Council Finance and Utilization Review Committee; and member of the California Hospital Association /Hospital Council UR Study Group.

Ms. Jackson holds a BS in nursing from the University of California.
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Dexter Jung, PhD Senior Scientist, Scientific Affairs



- Program Review and Evaluation
- Statistician
- Healthcare Practice
- Healthcare Research

Dexter Jung provides biostatistical leadership, direction, and support, including sample size calculations and analytic reports for the Hospital Data Collection projects. He leads the development and maintenance of Lumetra's performance monitoring reports, used to track and monitor progress on corporate quality improvement activities. Moreover, he is the lead analyst for the special study on inter-reviewer reliability for physician reviewer utilization decisions.

Dr. Jung is experienced in confidentiality and data protection issues, and serves as the data protection officer for Lumetra. In this capacity, he provided support and review of data releases and processes, and educated staff on data protection and HIPAA compliance. Dr. Jung participates in national committees to support the network of Quality Improvement Organizations (QIOs) across the country.

Prior to joining Lumetra, Dr. Jung was a statistician in the Division of Epidemiology at Stanford University, where he applied his biostatistical expertise to studies in cardiovascular disease, all-cause mortality, colon cancer, ovarian cancer, dietary recall, and survival analysis. In addition he was responsible for the management and analysis of large data sets.

Dr. Jung holds a doctorate in biostatistics from the University of California at Berkeley.

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Peter N. Kwok, PharmD Consultant to Lumetra

Medical Management

A consultant to Lumetra, Peter Kwok is the founding principal of PNK Associates, a comprehensive managed healthcare and pharmaceutical consulting practice. Prior to starting his consulting practice, he was vice president of Pharmacy, Injectables and Specialty Pharmacy Programs, for HealthNet Inc., a national managed healthcare organization covering approximately five million lives bicoastally.

Dr. Kwok's experience in managed care pharmacy spanned over thirteen years, both as a clinical pharmacy director and vice president of pharmacy programs for a number of healthcare organizations here and abroad. His scope of responsibilities included establishing clinical programs to ensure cost-effective pharmaceutical care, collaborating with healthcare providers to manage drug utilization, implementing NCQA and drug therapy-related quality improvement activities, establishing new managed care models in the Asia-Pacific market, and performing pharmaceutical utilization management and infra-structure improvement initiatives.



In addition to managed care pharmacy practice, Dr. Kwok also spent 14 years in institutional pharmacy practice, both as a clinical specialist and director of pharmacy services in several community hospitals and tertiary medical centers, including inpatient, ambulatory, and public health settings. He also spent eight years specializing in oncology pharmacy practice and pain management.

Dr. Kwok received his undergraduate A.B. degree in bacteriology from the University of California, Berkeley, and a doctor of pharmacy degree (Pharm.D) from the University of California, San Francisco.

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Mary Larson, RN, MSN, CPHQ Quality Improvement Advisor



- Program Review and Evaluation
- Program Consultation
- Healthcare Practice

Mary Larson is a quality improvement advisor at Lumetra, where she has been responsible for the implementation of regional healthcare improvement projects in California. In this role she has developed and maintained collaborations between quality improvement organizations and healthcare providers. She has more than 28 years of experience in healthcare, with special emphasis on quality and performance improvement, case and outcome management, medical record review, process and system change, and team building and facilitation.

Before joining Lumetra, Ms. Larson was responsible for planning, designing, and implementing utilization and quality management programs, including quality team formation, organization, and facilitation. She has developed a wide range of educational materials for patients, staff and the community, medical policies and procedures, and provider manuals.

Ms. Larson is a certified professional in healthcare quality and has served as director for the international Healthcare Quality Certification Board. She holds a master of science degree in nursing.



Ju Ruey-Jiuan Lee, PhD, MPH Senior Scientist, Scientific Affairs



- Program Review and Evaluation
- Statistician
- Healthcare Practice
- Healthcare Research

Ju Ruey-Jiuan Lee is a senior scientist in Lumetra's Scientific Affairs Business Unit, where she exercises her expertise in research design, quantitative research, data analysis, and quality measures evaluation. She provides extensive analytical support to the Nursing Home Quality Initiative on sample size determinations, project monitoring, and project design. She has conducted comprehensive analyses of California nursing home characteristics and is a specialist in nursing home quality measures. She has also broad experience working with data from a diverse range of sources. Additionally, Dr. Lee collaborates with a Lumetra team to evaluate Quality Assessment Performance Improvement projects reported by managed care organizations for 17 states and four Centers for Medicare & Medicaid Services Regional Offices.

Prior to joining Lumetra, Dr. Lee worked in both academic and non-profit organizations as an epidemiologist and senior investigator in neurological disorders, cancer, and cardiovascular disease.

Dr. Lee holds a doctorate in epidemiology with minors in biometry and health promotion from the University of Texas Health Science Center in Houston, and a master of public health in community health from National Taiwan University, Taiwan.

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Patricia Lin, MPH Healthcare Data Analyst II, Scientific Affairs



- Statistician
- Healthcare Practice
- Healthcare Research

Patricia Lin serves as a healthcare data analyst for the Hospital Quality Improvement and Data Collection projects, the Inter-Rater Reliability Extended study, and the Prevention of Unnecessary One-Day Hospital Stays study. Her areas of expertise include data collection, analysis, and reporting of epidemiological and health services studies. She is responsible for data analysis, evaluation, and reporting for Hospital and other inpatient data-related Quality Improvement projects.

Prior to joining Lumetra, Ms. Lin was a Statistician at the VA Puget Sound Health Care System, where she conducted health economics and outcomes research on several studies. Ms. Lin has also held positions of researcher at the University of Washington HPV Research Group, and research associate at the Palo Alto Institute for Research and Education. She has conducted research in the areas of depression, cardiac care, genetics and chronic diseases.

Ms. Lin holds a master of public Health in epidemiology from the University of Washington, and bachelor of arts degree in molecular and cellular biology from the University of California at Berkeley.



Antonio P. Linares, MD, FAAFP Vice President, Medical Affairs



Antonio Linares is a licensed physician with extensive experience in medical management, strategic healthcare planning, clinical data analysis, and program review and evaluation. As vice president of Medical Affairs at Lumetra, he serves as the lead physician for national quality improvement projects across settings, and provides senior physician support for clinical quality indicators, process measures, and data collection for partner providers. Dr. Linares serves as Lumetra's executive leader in the DOQ-IT Special CMS Study to promote statewide and national efforts to accelerate adoption of electronic health records in physician offices and support practice redesign to improve chronic care outcomes.

- Program Review and Evaluation
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- Healthcare Research

Prior to joining Lumetra, Dr. Linares was the founding medical advisor for California's Department of Managed Health Care. The department was created by an increased demand to hold HMOs and managed care systems more accountable to quality care by implementing an external review program. Dr. Linares served as a member of the director's executive team and as the chairperson to the department's Clinical Advisory Panel. The panel reviews the consumer protection process for more than 20 million HMO members and promotes evidence-based practice, patient safety, and the reduction of medical errors.

Dr. Linares was the Pilgrim Medal Award recipient at the Defiance College and received a medical degree at Case Western Reserve University School of Medicine. He completed a family practice residency at the University of California, Davis, and served in the Public Health Service and National Health Service Corps at the San Ysidro Health Center in San Diego.

Dr. Linares has served as adjunct faculty at the Center for Health Policy at the Stanford University School of Medicine and at the Primary Care Health Policy Research Center at the University of California, Davis School of Medicine. He is a Fellow of the American Academy of Family Physicians and an active member of the American College of Physician Executives since 1988.



Kathryn A. Lowell Vice President, State Business

- Program Review and Evaluation
- Strategic Planning

Kathryn Lowell is vice president of Business State at Lumetra. She is responsible for providing strategic leadership to grow the company's service lines through new service development, partnerships, and opportunity identification.

Prior to joining Lumetra, Ms. Lowell served as Vice President of Marketing at MAXIMUS, a government services firm. Central to this role was strategic planning, new product development, partnership development, proposal development, and public relations. Ms. Lowell implemented corporate-wide marketing strategies for new and existing product lines. She played a key role in securing the company's largest contract, valued at \$419 million.

Prior to MAXIMUS, Kathryn served as the Assistant Secretary for Health for the State of California in the Health and Human Services Agency. Appointed by the Governor and the Cabinet Secretary, Kathryn had oversight responsibility of Medi-Cal, pharmaceutical programs, licensing and certification of health facilities, and long-term care programs. She supervised the development and implementation of major policy initiatives.

Ms. Lowell earned her bachelor's degree from Stanford University and a master's from University of Southern California. She is a graduate of the Program for Senior Executives in State and Local Government at Harvard University. She serves as an advisor for the Center for Health Services Research at the University of California at Davis and advisor to University of Southern California's School of Policy, Planning, and Development in Sacramento.

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Lanz Rexford Lowen Consultant to Lumetra

Strategic Planning

A consultant to Lumetra, Lanz Rexford Lowen helps organizations find competitive advantage by enhancing their abilities to think strategically, creatively problem-solve and align cohesively toward a desired direction. Mr. Lowen works with leaders and teams to clarify purpose, define strategic priorities, resolve conflict, increase influence, and effectively implement organizational change.

Mr. Lowen's practice ranges from individual coaching to design and facilitation of leadership development and team building programs for large groups. Clients include Apple Computer, Autodesk, Chevron, Cisco Systems, Dey Laboratories, Fujitsu Computer, Health Dimensions, Inc, Hewlett Packard, Hitachi Instruments, Kaiser Permanente, IBM, Price Waterhouse, Safeway, San Jose State University, Southern California



Gas Company, Stanford Graduate School of Business, Sun Microsystems, Nestle Beverage Company, University of California at San Francisco, and University of California at Berkeley.

He holds a master's degree in industrial and organizational psychology from San Francisco State University, and a master's in clinical psychology from the Professional School of Psychology in San Francisco.

###

Edward M. Lukawski, MD Associate Medical Director, Medical Review



- Program Review and Evaluation
- Program Consultation
- Case File Review
- Healthcare Practice
- Medical Management
- Healthcare Research

Edward Lukawski serves as associate medical director in support of the day-to-day operations and management of the Medical Review Business Unit. His duties include the recruitment, credentialing, and recredentialing of peer reviewers comprising Lumetra's panel of more than 350 California practitioners from the entire spectrum of health care as well as the oversight of the process that results in medical case review determinations through the peer review process.

Prior to joining Lumetra, Dr. Lukawski served as a full-time medical director for health plans and medical groups in Northern California, primarily focused on the management of medical services in the HMO setting. While medical director at Blue Shield of California, he was chairman of the plan's statewide Pharmacy and Therapeutics Committee and served as the in-house physician consultant for the Pharmacy Services Department. In these roles, he participated in the creation and development of processes related to the management of the closed formulary and provided education for pharmacists and technicians. As Vice President and Senior Medical Director of the Mills-Peninsula Medical Group, he was responsible for utilization management, quality improvement, credentialing, grievances and appeals, and regulatory compliance. His achievements included the creation and implementation of a comprehensive utilization management program for outpatient cardiology services.

Dr. Lukawski has worked in several hospitals' emergency departments, most notably as Assistant Professor, Division of Emergency Medicine and Trauma, at Johns Hopkins Hospital in Baltimore, where he directed the emergency department's quality assurance program, achieving full accreditation. He holds a medical degree from Harvard Medical School.



Susan S. Merrill, PhD, MPH Director, Scientific Affairs



- Program Review and Evaluation
- Statistician
- Healthcare Practice
- Healthcare Research

Susan Merrill provides leadership and guidance for the design, implementation, and evaluation of all of Lumetra's Medicare Quality Improvement projects, including Lumetra's breast cancer and women's health quality improvement projects. She directs analysis and evaluation in the physician office setting, most recently for the Doctor's Office Quality – Information Technology (DOQ-IT) project. She also is responsible for the design and evaluation of the national CMS Inter-Rater Reliability and beneficiary satisfaction projects for case review.

Dr. Merrill has 20 years of experience in national and state-specific data sets analysis. Prior to joining Lumetra, she a fellow at the Institute of Gerontology at the University of Michigan. She serves on several advisory groups for health entities in California, is a reviewer for journals published by the Gerontological Society of America and the American Association of Public Health, and has published numerous papers on health and aging.

Dr. Merrill holds a doctorate in epidemiology and a master's degree in public health from Yale University.

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Rita Mistry, MPH Manager, Scientific Affairs

- Program Review and Evaluation
- Strategic Planning
- Healthcare Research

Rita Mistry manages and works with a team of scientists, healthcare data analysts, and healthcare information specialists conducting healths services research and healthcare quality improvement activities. She monitors team effectiveness, objectives, and deadlines, and plans for future business by overseeing proposal development and procurement.

Prior to joining Lumetra, Ms. Mistry served as program manager of the University of California, San Francisco's (UCSF) Oncology programs at San Francisco General Hospital Medical Center. She has an extensive background in design, management, and evaluation of public health programs as well as health education and communications. Her experience has included working on complex federal and statewide public health initiatives on bioterrorism, chronic disease, HIV/AIDS and reproductive health.

Ms. Mistry holds a master of public health from Tulane University School of Public Health, and a bachelor of arts in biochemistry and Cell Biology from the University of California, San Diego.



Glen Moy Project Manager



Program Consultation

Glen Moy is the project manager for the Doctor's Office Quality-Information Technology (DOQ-IT) project promoting the adoption of electronic health record systems in small- to medium-sized physician practices. He is responsible for the program in California, as well as serving as the primary contact for the EHR vendor community regarding DOQ-IT. Mr. Moy's professional background includes 13 years in healthcare, with extensive experience implementing Information Technology (IT) in acute care and ambulatory environments.

Prior to joining Lumetra, Mr. Moy was a senior project manager and implementation consultant for a major EHR vendor, and he provided technical assistance in the development of database applications and evaluation programs in the healthcare sector.

Mr. Moy holds a bachelor of arts degree in chemistry from the University of Chicago.

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Bonnie Noble, MAOP, RN, CPHQ Director of Administrative Operations



- Program Review and Evaluation
- Program Consultation
- Healthcare Practice
- Strategic Planning

Bonnie Noble oversees key operational functions for Lumetra, including contract administration and performance monitoring, quality management, fiscal management, and development of proposals to respond to new business opportunities. She provides program leadership to facilitate the success of cross-departmental teams and works closely with senior management in corporate strategy development and implementation.

Ms. Noble has more than 20 years of clinical, consulting, and management experience. Prior to working at Lumetra, she held executive positions within large home health providers and other managed care organizations, specializing in the development and implementation of performance and quality improvement programs, financial and business development, regulatory responsibility, and administration.

Ms. Noble received a nursing degree from Santa Ana College, a BS in Business from the University of New York, Excelsior College, and a master's degree in organizational psychology. She is currently completing a Ph.D. in organizational psychology at Alliant International University. In addition, she is a member of the California Association of Healthcare Quality and is a Certified Professional in Healthcare Quality with IHI methodology training.



Sandra Nuñez, MPH Healthcare Data Analyst III, Scientific Affairs

- Program Review and Evaluation
- Statistician
- Healthcare Practice
- Healthcare Research

Sandra Nuñez is responsible for data analysis of the Lumetra's Mediation and Beneficiary Protection project. She also supports Lumetra's Nursing Home team, working to improve clinical and process improvement measures, and assists in the development and evaluation of programs intended to improve the safety and delivery of prescription drugs in the Medicare system.

Prior to joining Lumetra, Ms. Nuñez worked as an independent research consultant for Bellevue Hospital, the New York City Department of Health, Columbia University and the Commonwealth Fund, as well as for the Administrative Office of the Courts in California.

Ms. Nuñez holds a master's in public health from the Mailman School of Public Health at Columbia University, where she specialized in the study of effectiveness and outcomes research in the Health Policy and Management division. She holds dual bachelor of arts degrees in psychology and sociology from the University of California at Berkeley.

Rebecca Olson, PhD, MS Senior Scientist, Scientific Affairs



- Program Review and Evaluation
- Statistician
- Healthcare Practice
- Healthcare Research

Rebecca Olson is responsible for the design, implementation, and evaluation of Medicare Quality Improvement projects at Lumetra, providing analytic, statistical, and evaluation support for managed care plans, physician offices, and underserved populations. She is experienced in the analysis of Medicare enrollment and billing data (inpatient and outpatient), particularly for the diabetic population.

Dr. Olson is an expert in the area of diabetes quality improvement and public health. She has been active in the Diabetes Coalition of California since 1998, leading the Guidelines Committee 2001-2002 and currently serving as coalition chair. Prior to joining Lumetra, Dr. Olson worked as an epidemiologist at the Diabetes Control Program in the New Mexico Department of Health.

Dr. Olson holds a doctorate in nutritional sciences with a minor in epidemiology from Cornell University. She also holds a master of science in nutrition from Cornell University, and completed a two-year training program in public health and applied epidemiology with the Centers for Disease Control and Prevention.



Ana Perez, MSN, APRN, BC-ADM, CDE, CPHQ Senior Project Manager



Program Review and EvaluationHealthcare Practice

improvement at Lumetra. Her responsibilities include leading and supervising multidisciplinary teams, hiring, training, evaluating performance, and budget planning. She is an expert in diabetes care, actively involved in promoting patient-centered care and supporting patient self-management goals.

Ana Perez is responsible for primary care physician practice quality

Prior to joining Lumetra, she was a diabetes care manager involved in the diabetes curriculum development for the Spanish program at Kaiser Permanente Oakland, where she developed and coordinated the first group appointment for Latinos with diabetes. Additionally, she was an adjunct faculty member in the Nursing Department at Holy Names College, Oakland.

Ms. Perez holds a master's degree from the University of San Francisco, and an Advance Practice Nursing, Board Certification for Diabetes Management (APRN, BC-ADM). She is also a certified public health nurse in the State of California, a certified diabetes educator (CDE), and a certified professional in healthcare quality (CPHQ).

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Mary L. Ralston, PhD, MS Senior Scientist, Scientific Affairs



- Program Review and Evaluation
- Statistician
- Healthcare Practice
- Healthcare Research

Mary Ralston provides analytic and statistical support for the Doctor's Office Quality Pilot, Home Health Quality Improvement, Hospital Quality Improvement projects, and the Hospital Payment Monitoring Program (HPMP) projects. She is also Lumetra's data content expert on the home health quality measures including the Home Health Compare data, OBQI reports and the OASIS data set.

Before joining Lumetra, Dr. Ralston worked in the Cancer Epidemiology group of the Department of Epidemiology and Biostatistics at University of California, San Francisco. In this role she was responsible for monitoring quality and integrating clinical, laboratory, and interview data collected for several longitudinal cancer studies. Dr. Ralston also has several years experience consulting for a biotechnology company where she provided statistical expertise in all phases of experiments (initial design, data collection, data analysis, interpretation of results) for a broad spectrum of applications including analysis of variance, regression, cluster analysis, and maximum likelihood estimation.

Dr. Ralston holds a doctorate and a master's degree in biostatistics from the University of California at Los Angeles.



Fabio Sabogal, PhD Senior Health Care Information Specialist



Program ConsultationHealthcare Research

- Fabio Sabogal is responsible for synthesizing evidence-based information to develop interventions for Lumetra's Managed Care, Doctor's Office Quality Information Technology, Underserved, Physician Office, Hospitals, and Home Health projects.
- Dr. Sabogal has expertise in cultural competency for healthcare issues, as well as extensive experience in minority health services research and ethnic social marketing. He has directed various intervention studies on factors involving health behavior and behavioral change in minority communities, and has created award-winning health education materials including TV commercials, radio public service announcements, and printed materials. His areas of interests include preventive services, breast cancer detection, reduction of health care disparities, communications, cultural competency, information technology and systems approaches to behavioral change.
- Dr. Sabogal has more than 20 years of experience as a university professor and researcher, and has written more than 50 peer-reviewed journal articles. He has held positions at University of California, San Francisco at the Division of General Internal Medicine, Medical Effectiveness Research Center, and Center for AIDS prevention Studies. Dr. Sabogal has received awards from the National Cancer Institute, American Cancer Society, and the Ford Foundation.
- Dr. Sabogal holds a doctorate in psychology from the University of North Texas at Denton, Texas. He also holds a master of science in educational research from Del Valle University in Guatemala, and a bachelor of arts in psychology from the Javeriana University in Colombia.

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Linda M. Sawyer, PhD, APRN, BC Chief Operating Officer



Linda Sawyer provides primary leadership for Lumetra's day-to-day operations, including the Quality Improvement Organization contract and special studies with the Centers for Medicare & Medicaid Services. She is responsible for organizational and strategic planning, achieving documented results, passing contract evaluations, and exceeding customer satisfaction.

Before joining Lumetra, Dr. Sawyer was assistant clinical professor at the University of California San Francisco School of Nursing, and a coordinator of Quality Assurance & Staff Development at Kaiser Home Health Agency. With 20 years of nursing leadership on the national and state levels, Dr. Sawyer has served as Board President of the California



- Program Review and Evaluation
- Program Consultation
- Healthcare Practice
- Strategic Planning

Nurses Association (CNA), and has served on the Board of Directors of the American Nurses Association (ANA), American Nurses Credentialing Center, ANA Political Action Committee, and the Alameda County Nurses Association (ACNA). She has also chaired and facilitated multiple committees developing policies and products to address healthcare issues, including the Strategic Planning Committee of the American Nurses Credentialing Center Board of Directors, the American Nurses Association Advisory Group for Community Nursing Quality Indicator Development, and the 2000 International Congress on Women's Health Issues.

She holds a PhD from the University of California, San Francisco School of Nursing, and a master of science degree in nursing from the University of California, San Francisco.

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Laura Stewart, RN, MPA/HSA, CPHQ Project Manager

 Program Review & Evaluation Laura Stewart manages the review and evaluation of Medicare Advantage organizations' quality improvement projects. Her responsibilities include technical assistance to Medicare Advantage plans, quality improvement organizations, and the development of collaborative charters, change packages, and preparatory materials for initiatives in the physician office setting.

Ms. Stewart has more than 20 years of acute-care nursing experience in ICU/CCU and as a medical-surgical clinical instructor. In the outpatient setting, her clinical experience focused on congestive heart failure disease management, design and implementation of nursing strategies, and teaching ad advising Alameda County Medical Center staff. In the non-clinical managed care setting, she worked as a senior provider relation's specialist for two independent practice associations.

Ms. Stewart holds a master of public administration/health services administration from the University of San Francisco.

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Merry Tantaros is responsible for managing the national Quality Assurance Performance Improvement projects required of Medicare Advantage organizations by the Centers for Medicaid & Medicare Services. She organizes multidisciplinary workgroups, performing within stringent project timelines and budgetary constraints.

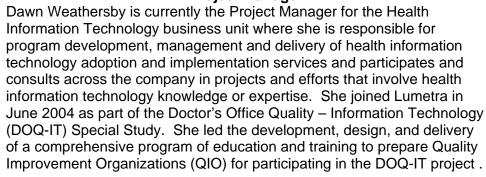


 Program Review & Evaluation Prior to joining Lumetra, Ms. Tantaros worked in managed care operations at both the medical group and health plan level for ten years, applying her expertise in peer review, physician recruitment and retention, and credentialing. Before entering the managed care field, Ms. Tantaros specialized in the recruitment of licensed health care professionals for high volume emergency departments nationwide and multiple projects overseas.

She holds a BS in nursing and a master's degree in organizational management from University of Phoenix.

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Dawn Weathersby, MS, RN Project Manager





- Program Review and Evaluation
- Program Consultation
- Healthcare Practice

Before coming to Lumetra Ms. Weathersby worked in the software development industry for CareCentric and Cerner where she developed and implemented methodologies for the management of requirements, business process modeling, and process redesign. She has been an instructor at the University of California San Francisco (UCSF), School of Nursing Graduate Program; member of the leadership board of the American Medical Informatics Association, Nursing Informatics Working Group; and a member of the Nursing Organization Alliance Task Force on a Healthful Work Environment for Nursing. Currently she is a member of the AMIA-NIWG 2006 Nursing Informatics Symposium Program Committee.

Ms. Weathersby obtained her undergraduate degree in nursing from California State University, Sacramento, a master's degree in nursing informatics from the University of California, San Francisco, and currently in her third year of the doctoral program in nursing at the University of California - San Francisco where her studies focus on the impact of bar code point of care technology on errors in medication administration.



2.2 LUMETRA STAFF RESUMES

Mindy Coots-Miyazaki MSN, CPHQ

Senior Project Manager

Professional Experience

Senior Project Manager, Lumetra 2005 – Present

Leads Lumetra's statewide Home Health Quality Improvement Project to build capacity of California Home Health Agencies to utilize Outcome-based Quality Improvement methodology, practice evidence—based care, promote successful implementation of Home Telehealth, and improve organizational culture. Develops and maintains partnerships with statewide and national quality improvement coalitions, professional associations, trade associations

Director, Program Development, Lumetra 2004 – 2005

Directed Lumetra's special study quality improvement projects in managed care, physician office quality and HIT implementation. Developed and maintained partnerships with statewide and national quality improvement coalition, professional associations, and trade associations.

Director, Community-Based Quality Improvement, Lumetra 2002 – 2004

Directed quality improvement projects in managed care, home health, physician office, and community settings. Developed and maintained partnerships with statewide quality improvement coalitions, the California Department of Health Services, professional associations, trade associations.

Project Manager, Managed Care & Home Health, CMRI 2001 – 2002

Lead project management activities for statewide quality improvement programs for Medicare Managed Care and Home Health Projects. Responsible for leading collaborative interventions and data collection for statewide heart failure quality improvement project. Developed statewide training and quality improvement project for Home Health Outcome-Based Quality Improvement (OBQI).

Consultant & Independent Contractor 2000 – 2001

Developed profiles of California Medicare+Choice Oranizations and Managed Care Market Analysis for CMRI Managed Care Department. Completed Resource Manual for Medicare+Choice Quality Review Organization Training.

Home Health Nurse II, Kaiser Permenete 1981 – 2002

As RN Case Manager, coordinated care delivered by multidisciplinary team and provided a broad scope of nursing services to patients and families in their homes.



Member of Quality Improvement Committees and Regional Home Heath Nursing Peer Group. Participated in projects to improve patient care including IV and foley catheter care, documentation, care coordination, and wound care.

Staff Nurse II 1977 – 1981 Kaiser Permenete Hospital, Oakland, CA Staff nurse on acute adult medical unit and the Organizer and Chair of the Hospital Professional Performance Committee at Kaiser Oakland.

Licenses and Certifications

- Registered Nurse, California
- Public Health Nurse, California
- Certified Professional in Healthcare Quality

Education

- MA, Nursing Case Management, Sonoma State University
- BS Nursing, University of California San Francisco



Kelle D. Eason, MPH

Healthcare Data Analyst III, Scientific Affairs

Professional Experience

Healthcare Data Analyst III, Scientific Affairs, Lumetra 11/2000 – Present

Serves as lead analyst for Lumetra's Managed Care team, studying quality of care provided by Medicare Managed Care plans in California, as specifically related to CMS QAPI annual projects. Analyst for Doctor's Office Quality-IT (DOQ-IT) project, and for the MBP QIOSC. Previously the Project Manager for the hospital Stroke project, which ended in 2003.

Data Manager, Stanford/VA Alzheimer's Center 02/2000 – 11/00

Managed the database design, data collection, storage, and analyses for a longitudinal study of prescription medications, vitamins, and herbs used by patients with Alzheimer's disease.

Research Associate, Agency of the Institute of Medicine, National Academy of Sciences

03/1999 - 11/1999

Responsible for the cataloging and analysis of the data of some 60 or more populations that had been previously studied by the Medical Follow-Up Agency during its 50 year history.

Education

- Master of Arts, George Washington University
- Bachelor of Arts, Psychology, University of Missouri-Kansas City

Awards and Honors

- Dean's List 1981—1983, University of California at Santa Barbara
- Magna Cum Laude. San Francisco State University, 1983
- Spirit of Excellence Award, Association of American Medical Colleges (outstanding employee), 1999



Michelle M. Fernandez, MPH Healthcare Data Analyst II, Scientific Affairs

Professional Experience

Healthcare Data Analyst II. Lumetra 03/2003 – Present

- Analyzes Medicare administrative claims, data abstracted from medical records, survey, epidemiological and other relevant databases.
- Interprets analytical results and present key information to the project team and other audiences.
- Provides analytical support to provider teams regarding quality improvement collaboratives.
- Collaborates with other project team members in the design of quality improvement initiatives.
- Coordinates and manages internal data programs standardization project.
 Developed standardized technical documentation for programming and healthcare summary reports.
- Participates in new business initiatives regarding grant and manuscript development.
- Presents project-related analysis results at national conference.

Program Associate, Strategic Initiatives Manager Children and Families First Commission 07/2002 – 02/2003

- Managed strategic initiatives regarding children's health policy and program development.
- Evaluated and analyzed health and community program policy and development through focus groups and inter-agency collaboration.
- Consulted grantees and project managers regarding program evaluation and development, including development of evaluation outcomes, scope of work detail and analysis findings.

Public Health Epidemiologist, Program Coordinator Department of Health and Human Services, Placer County, Community Health – Maternal and Child Health Division 10/1999 – 06/2002

- Collaborated, consulted and provided epidemiological and statistical expertise to health agencies, community based organizations and other public, private and non-profit sectors regarding health programs and services.
- Evaluated and analyzed programs and health status indicators to identify high risk and at needs communities and assess health of populations.



- Maintained data systems and monitored surveillance of communicable and chronic diseases.
- Consulted Children and Families Commission on policy issues impacting children, youth and families' utilizing outcomes-based evaluation and analysis.
- Published countywide needs assessment report evaluating health indicator trends and community impact.
 - → Developed and published family violence prevention strategic plan. Collaborated with health education and prevention division to address public health issues and awareness to public, particularly emphasizing youth prevention and asset-based resiliency programs.
- Co-chair of Child Death Review and Fetal Infant Mortality Review.

Public Health Program Coordinator/ Analyst Massachusetts Department of Public Health, Bureau of Family and Community Health, Division of Statistics and Evaluation 05/1998 – 06/1999

- Provided user support and guidance in utilizing MassCHIP (MA Community Health Information Profile) client-server database system. Analyzed community indicators and health data to assess community needs, monitor health status indicators and evaluate programs.
- Developed and implemented a user survey study for feedback on service and quality of system and data, including design of survey and data collection process and distribution of survey. Consulted clients concerning research for public health and community level data.
- Prepared and presented MassCHIP educational workshops statewide.
 Organized and scheduled conference presentations and training for outreach
 of database utilization and advocacy of MassCHIP as a resource tool.
 Trained and educated community agencies, local health departments, health
 care providers, consultant and advocacy groups to utilize MassCHIP and
 present educational workshops.
- Coordinated and maintained user/ technical support help desk and client registration process to access MassCHIP. Participated in testing and validation process of database to assure product quality. Updated and assisted in maintenance of worldwide Web page for MassCHIP project.

Massachusetts Department of Public Health Bureau of Family and Community Health, Division of Elder Health 1997–1998

- Coordinated Diabetes Control Project, including data entry, collection, analysis and final evaluation of study results.
- Utilized epidemiologic study design and analysis and data collection mechanisms on Epi Info 5.0 to develop program for diabetic "Patterns of Care" survey. Prepared and authored report for result findings for "Patterns of Care" survey.
- Provided outreach and disseminated educational materials regarding diabetes care to health professionals, prevention centers, and community



health care centers. Prepared and edited reports and publications on education for diabetes care, management, and awareness for local community newsletter and professional journal.

Reagents Manufacturing Technician Lifescan, Johnson & Johnson Inc. 04/1997 – 08/1997

- Processed manufacturing line for glucose test strips for One Touch reagents operation department.
- Performed control and blood sampling tests, including hospital lots, for glucose test strips and diabetic glucose monitoring systems to assess product quality.
- Evaluated market and current technology/ manufacturing development of diabetic products.

Education

- Master of Arts, Public Health, Boston University School of Public Health
- Bachelor of Science, Physiological Sciences, University of North Carolina at Chapel Hill



D. Lynn Fiorica, MS, RN, BS

Senior Project Manager, Process and Systems Improvement

Professional Experience

Sr. Project Manager, Process and Systems Improvement, Lumetra

- Plans, directs and coordinates the administration and management of the Medical Review Business Unit's Systems Improvement efforts, Internal Quality Development, Safety and Risk Management.
- Conducts presentations on LEAN Quality Improvement Methodology.
- Leads multidisciplinary teams in identifying areas of inefficiency, and facilitates the enhancement and streamlining of processes.
- Establishes and strengthens collaboration with the QIO community by creating a partnership for quality improvement opportunities through the application of LEAN Quality Improvement Methodology.
- Collaborates with the Medical Review Department to develop an effective workflow design to ensure the creation of a high quality product delivered in a timely manner.
- Responsible for assessing and analyzing quality indicators and developing reporting tools to determine required performance measures.

Quality Manager/Beneficiary Services Manager, Lumetra

- Trained and led staff through transformational change by the application of LEAN Quality Improvement Methodology.
- Planned, directed, and coordinated the administration and management of a team of professionals and support staff.
- Responsible for overall daily operations related to Beneficiary Services and development of the Medical Review team's Internal Quality Control (IQC) program.
- Implemented aspects of fiscal, administrative, HR, and systems improvement efforts.
- Plays a significant role in the introduction and coordination of organizational Quality Improvement initiatives.
- Introduced a risk management and safety awareness design proposal.
- Created and developed reporting tools and measurement strategies to interpret QI indicators.

Risk Manager, Kaiser Foundation Hospital

- Responsible for the daily operations of Risk Management activities in the Vallejo Medical Center.
- Promoted risk identification throughout the Napa/Solano service area.



- Provided regulatory guidance and education to physicians and staff to ensure compliance with regulatory and legislative standards such as JCAHO, DHS, and NCQA as they related to risk management.
- Conducted Root Cause Analysis (RCA) of significant events.
- Prepared and presented reports of RCA to various committees and the Board of Directors.
- Ensured compliance with internal policies and external standards for identification and management of significant events.
- Led patient safety awareness educational program for the Napa/Solano service area.

Service Area Manager, The Permanente Medical Group

- Directed and supervised the overall operational activity of the Adult Medical facility and Minor Injury Center.
- Responsible for 88 direct reports, including Nurse Practitioners, Nurse Case Managers, Registered Nursing Staff, LVNs, Medical Assistants, and Clinical Health Educators.
- Worked collaboratively with more than 100 members of an interdisciplinary team of providers.
- Prepared and administered departmental budget.
- Identified and implemented strategies to reduce workers' compensation claims.
- Developed and collaborated with leadership in the implementation of employee/patient safety measures and workplace redesign for enhanced safety and workflow systems.
- Actively participated in the Labor Management Partnership Steering Committee.

Ambulatory Services Director, Children's Hospital

- Responsible for overall operation and systems development of Pediatric Endocrinology, Gastroenterology, Nephrology, Pulmonary Medicine, Hematology, and Nutrition departments.
- Worked collaboratively with 10 associated physician directors in meeting the strategic goals of the Ambulatory Division.
- Developed, in conjunction with the interdisciplinary team, policies, procedures, goals, and objectives.
- Prepared and administered departmental budget, forecasting annual volume and revenue projections within established timeframes.
- Directed departmental preparation project for Joint Commission survey, receiving JCAHO compliance commendation.



Medical Services Manager/Physician-Plan Liaison, Protective Health Providers

- Worked with departmental leaders in ensuring quality, cost-effective use of all healthcare service.
- Planned, directed, and coordinated annual citywide Health Fair.
- Responsible for monitoring of seven off-site affiliated medical clinics.
- Directed services for beneficiaries though interfacing with the physicians and health plan.
- Chaired monthly Utilization Review Committee meeting.

Memberships

American Society for Quality (ASQ)

Education

- Master of Science, Healthcare Management, Samuel Merritt College, 1998
- Golden Gate University School of Law, September 1994

 –January 1996
- Bachelor of Science, Psychology, San Diego State University, 1991
- Jacksonville College of Nursing, Graduate Degree Nursing Program, 1982
- Licensed Registered Nurse, California



Mary Giammona, MD, MPH Senior Medical Director. Medical Review

Professional Experience

Senior Medical Director, Medical Review, Lumetra

- Dr. Giammona is a nationally recognized expert in Quality Improvement Organization (QIO) review of Emergency Medical Treatment and Labor Act (EMTALA) cases. She recruits physician reviewers needed to provide peer review of cases in California and provides oversight to ensure the reviews are thorough, fair and impartial.
- As the Senior Medical Director of Lumetra's Medical Review Unit, Dr.
 Giammona arranges and facilitates meetings requested by hospitals and
 physicians to discuss EMTALA cases under review by the QIO as part of the
 60-day review process.
- Dr. Giammona annually participates and/or present on the QIO role in EMTALA at EMTALA training conferences sponsored by California's hospital association. These conferences are directed to hospitals and practitioners interested in understanding more about the EMTALA review process and any changes in regulations.
- Dr. Giammona is a nationally recognized leader in case review. As Lumetra's Senior Medical Director of Lumetra's Medical Review Unit, she assesses physician reviewer work to ensure it meets expectations of impartial, thoughtful peer review. Dr. Giammona developed the Physician Reviewer Self-Study Guide on CMS' Response Determination Categories, created letters used to communicate physician reviewer determinations to practitioners, providers and beneficiaries, and implemented Quality Improvement Plans. She has also presented numerous trainings for the QIO community on these issues at national conferences.
- As Senior Medical Director of Lumetra's Medicare Beneficiary Protection
 Quality Improvement Organization Service Center, Dr. Giammona serves as
 a national resource for QIO Medical Directors and Case Review Managers
 and is frequently contacted for technical assistance on physician-related
 issues.
- Dr. Giammona serves as the Confidentiality Officer for the QIO at Lumetra. In addition, she has recruited over 150 new medical peer reviewers for Lumetra in the past two years.
- As a Senior Medical Consultant in the Department of Health Services (DHS)' San Francisco Medi-Cal (California Medicaid) Field Office for 10 years, Dr. Giammona performs prior authorization of a panoply of services, including hospital stays, medical procedures, major organ transplants, and Durable Medical Equipment (DME). She works with DHS Medical Policy staff updating all types of major organ transplant criteria for the Medi-Cal program. Dr. Giammona helped develop DME policies for service authorization; analyzed issues such as infant hyperbilirubinemia, born out of asepsis babies; worked with Medical Policy staff (in Sacramento) to update major



organ transplant criteria and review applications for becoming transplant centers of excellence. She has also prepared Fair Hearing responses in these areas, testified as an expert witness on behalf of the State Department Health Services (DHS).

- Dr. Giammona developed and annually reviews the adult and pediatric transplant criteria for InterQual. She also recruited directors of the major bone marrow transplant centers in California to participate in a special study on review of breast cancer cases for possible transplant for DHS.
- Dr. Giammona helped develop and evaluate pediatric audit and review criteria National Medical Audit (NMA). She currently serves as a NMA Pediatric Reviewer for quality cases at issue for payment and for possible malpractice.
- Prior to joining Lumetra, Dr. Giammona was the Director of the Infant Health Intervention Program (IHIP) at the Mission Neighborhood Health Center in San Francisco from 1988-1991 where she led a multidisciplinary team in providing case management and healthcare delivery for high-risk infants as well as directed both the Teen Mom-Well Baby and High-Risk Teen Clinics. She also served as an Attending Pediatrician (Physician Specialist) at San Mateo County General Hospital; attending for the county Child Abuse Clinic.
- In conjunction with the San Mateo County Department of Education, the
 Jefferson Union High School District, and the San Mateo County Department
 of Health Services, Dr. Giammona helped develop and establish the first
 school-related teen health center in San Mateo County, the Daly City Youth
 Health Center, serving as Medical Consultant and attending pediatrician at
 Daly City Youth Health Center.

Licenses

- California Medical License (Physician and Surgeon Certificate)
- DEA License

Certifications

- Fellow, American Academy of Pediatrics
- Member, Society of Adolescent Medicine
- Diplomate of the American Board of Pediatrics (board-certified)
- Board-eligible in Preventive Medicine

Training

- Pediatric Primary Care Residency, University of California, San Francisco, 1983 – 1986
- Preventive Medicine Residency, University of California, Berkeley, 1986 1988

Education

- BA, University of California, San Diego, Spanish Literature 1979
- MD, University of California, San Francisco, 1983



MPH, University of California, Berkeley, 1987

Honors and Awards

- 1997 Sustained Superior Achievement Award, Department of Health Services (DHS) State of California
- 1987 Finalist, Henrik Blum Award for Distinguished Social Action, School of Public Health, University of California, Berkeley
- 1986 1987 United Cerebral Palsy Association Fellowship
- 1983 Alpha Omega Alpha Society
- 1978 Phi Beta Kappa Honor Society



Justin V. Graham, MD, MS

Associate Medical Director, Quality and Informatics

Professional Experience

Associate Medical Director, Quality & Informatics, Lumetra 2004 – Present

- Serves as a physician leader and team member implementing and evaluating healthcare information technology Quality Improvement (QI) projects, including the Doctor's Office Quality – Information Technology (DOQ-IT) Project.
- Provides expert medical support to internal staff and external parties.
- Provides guidance on quality improvement processes and clinical consultation to Lumetra staff /teams to assure successful implementation of designated projects.

Healthcare Strategy and Operations Deloitte Consulting 2003 – 2004

- National physician lead for inpatient clinical content design in the largest private clinical information system installation in the United States. This multibillion dollar Epic information system will be used by over 8,000 physicians, within an integrated delivery network that includes 30 hospitals, 430 medical offices, and 8 million members.
- Designed, built, and validated customized workflows, order sets, and documentation tools for physicians. Led teams of hospitalists, surgeons, pediatricians, intensivists, and obstetricians through the design process. Collaborated with the healthcare organization's evidence-based medicine center and patient safety leaders to develop high quality clinical content.
- Provided capability assessments and strategic planning for a cutting edge
 healthcare modeling and analysis project reporting to senior leadership of a
 \$20 billion+ integrated delivery network. Provided a detailed technology and
 functional assessment of the complex modeling tool, which encompasses
 disease physiology, care process algorithms, epidemiology, biostatistics,
 differential equations, and object-oriented programming.
- Developed change management tools to encourage clinician adoption of information technology, including electronic health records and computerized physician order entry, for a firm-sponsored project. Products included sample grand rounds presentations, mock business cases, and a change management website.

Independent Medical Informatics Consultant 1998 – 2003

 Designed clinical database, provided clinical content, and structured decision-support algorithms as Senior Lead Editor of ePocrates ID, an infectious disease decision-support tool for PDAs used by over 600,000 healthcare professionals worldwide.



- Provided technical and clinical input for several ongoing projects at Mercer Consulting, including quality assurance, process improvement, and specifications for ambulatory care electronic medical records.
- Created technical specifications for resource-limited treatment protocols using computerized decision-support for Veridian Systems and the Office of the Army Surgeon General.
- Collaborated in the application of a triage expert system to bioterrorism surveillance for DHSI Systems, Inc.
- Provided clinical and informatics expertise for the development of authenticated digital identities for licensed healthcare professionals as a member of the Professional Advisory Board of MEDePass, Inc.
- Drafted knowledge modeling specifications for a secure, structured, patientprovider communication web interface for Healinx, Inc. (now RelayHealth, Inc.)
- Compiled, annotated, and reviewed hundreds of medical Web sites and created one of the first healthcare website quality assessment rating systems as Internet Resource Editor for the textbook, CD-ROM, and online versions of Current Medical Diagnosis and Treatment, the flagship quick medical reference text for McGraw-Hill, Inc.

Stanford University 1999 – 2003

- Adjunct Clinical Faculty, Division of Infectious Diseases
- Post-Doctoral Fellow, Biomedical Informatics
- Designed an intelligent computer decision-support system to recognize and respond to large-scale infectious disease outbreaks, epidemics, and bioterrorism. Methods included utilizing knowledge-modeling of temporal abstractions to complement traditional epidemiologic public health surveillance, and evidence-based critique of recent decision-support system literature.
- Created and nurtured operational relationships between Stanford Medical Informatics and the Centers for Disease Control and Prevention, U.S. Army Medical Research Institute of Infectious Diseases, Veridian Systems Group, California State Department of Public Health, San Francisco Department of Public Health, and the Palo Alto Veterans Administration Medical Center.
- Participated in the implementation of an IDX Physician Order Entry system at Stanford Medical Center.
- Delivered oral and written presentations on clinical information system development, implementation, and integration into physician workflow.

Clinical Practice

- Infectious Diseases Attending & Hospital Epidemiologist, St. Luke's Hospital, San Francisco, CA, 2002 – present
- Medical Staff, AIDS Healthcare Foundation of California, 2003



- Clinical Instructor, Stanford University School of Medicine, Stanford, CA, 2002 – 2003
- Infectious Disease Attending, San Mateo County General Hospital, San Mateo, CA, 2001 – 2003
- Physician Volunteer, Rock Medicine Haight Ashbury Free Clinics, Inc, San Francisco, CA, 2000 – present
- Hospitalist, Mills-Peninsula Medical Center, Burlingame, CA, 2000 2002
- Infectious Disease Fellow, Stanford University School of Medicine, Stanford, CA. 1999 – 2002
- Internal Medicine Resident, Beth Israel Deaconess Medical Center, Boston, MA, 1997 – 1999

Education

- Stanford University, M.S., Biomedical Informatics, 2002
- University of California San Francisco, M.D., 1997
- Harvard University, A.B., magna cum laude, Biochemistry, 1992

Licensure and Certification

- Diplomate, Infectious Diseases, 2003
- Diplomate, Internal Medicine, 2000
- Full Licensure, Medical Board of California (A068099), 1999

Affiliations and Memberships

- Healthcare Information and Management Systems Society
- Infectious Diseases Society of America
- American Medical Informatics Association



Terry Hill, MD

Medical Director, Quality Improvement

Professional Experience (current)

- Medical Director for Quality Improvement, Lumetra, 2004 present
- Co-Chair, California Coalition for Compassionate Care (<u>www.finalchoices.calhealth.org</u>), 1999 – present
- Assistant Clinical Professor, Department of Medicine, UC San Francisco, 2000 – present
- Core Faculty, Stanford Geriatric Education Center, 1993 present

Education and Previous Professional Experience

- Medical Director, Laguna Honda Hospital and Rehabilitation Center, San Francisco, 1999 – 2004
- Clinical Assistant Professor, Department of Medicine, Stanford University, 1994 – 99
- Practicing Geriatrician and CEO, Geriatrics Medical Group, Oakland, 1994 –
 99
- Assistant Chief for Geriatrics, Hill Physicians Medical Group, 1996 99
- Medical Director for Geriatric Services, Summit Medical Center, Oakland, 1995 – 99
- Medical Director of Piedmont Gardens (Continuing Care Retirement Community), 1997

 – 99
- Medical Director of multiple skilled nursing facilities, 1993 99
- President, Clinics for the Treatment of Incontinence, Oakland, 1997

 99
- Faculty, Bayer Institute for Health Care Communication, 1993 98
- Certified Medical Director, American Medical Directors Association (recertified 2002), 1996
- Medical Director of hospitalist physician group, Summit Medical Center, 1993
 94
- Certificate of Added Qualifications in Geriatrics (recertified 2002), 1994
- NIH Postdoctoral Research Fellow, Stanford University, 1993 94
- Fellow in Geriatrics, Stanford University, Palo Alto VA Medical Center, 1991-93
- Diplomate, American Board of Internal Medicine (recertified 2002), 1991
- Medical Director, Community Adult Day Health Services, Oakland, 1990 91
- Chief Resident in Internal Medicine, Highland General Hospital, Oakland, 1990 – 91
- Resident Physician, Over 60 Health Center, Berkeley, 1988 90



- Resident in Primary Care Internal Medicine, Highland General Hospital, Oakland, 1987 – 90
- M.D., University of California, San Francisco, 1987
- Physical therapy aide, Alta Bates Hospital, Berkeley, 1978 83
- Truck driver, union organizer, journalist, poet, 1974 78
- B.A. in Literature, Reed College, Portland, 1974
- National Merit Scholar, 1970

Organizations

- California Association of Long Term Care Medicine
 - → President
 - → Member, Education Committee
- American Medical Directors Association
 - → Member, Ethics Committee
 - → Member, Communication Committee
 - → Member, Public Policy Committee, 1999 2001
- Center for Elders Independence (PACE project, Oakland)
 - → Member, Board of Directors
 - → Chair, Professional Advisory Committee
- San Francisco Adult Day Services Network
 - → Member, Board of Directors
- California Geriatric Education Center
 - → Member, Advisory Board
- Northern California Geriatric Education Center
 - → Member, Advisory Committee
- San Francisco Medical Society
- California Medical Association
 - → Member, Long Term Care and Aging Technical Advisory Committee, 1997-99
 - → Member, Committee on Long Term Care, 1992-4
 - → Member, Council on Quality Care, 1989 92
- American Geriatrics Society
- Gerontological Society of America
- American College of Physician Executives
- American College of Physicians/American Society for Internal Medicine
 - → Founding Member, 1990 94, Northern California Council of Associates
- American Medical Association



- California Physicians' Alliance
 - → Founding and Current Member
- California House Officer Medical Society (former member)
 - → Member of Governing Council, 1989 91
- California Association of Interns and Residents (former member)
 - → President, 1988 90

Experience in Program Development, Evaluation, and Quality

- 2005—Member, Review Committee for National Quality Forum's Framework and Preferred Practices for Palliative and Hospice Care Quality Project.
- 2001–2004 Member, Living With Dignity Policy Committee, San Francisco Department of Aging and Adult Services. Funded by Robert Wood Johnson Foundation to develop strategic plan and interventions to improve community-based long-term care in San Francisco.
- 2003 2004 Chair, Regional Collaboratives for Nursing Home Quality Initiative, Lumetra
- 1999 2004 Chair, Performance Improvement and Infection Control Committees, Laguna Honda Hospital. Member of design committees for new hospital and new information system.
- 1997 2002 Member, Best Practices Steering Committee, Division of Licensing and Certification, California Department of Health Services
- 1997 99 Member, Alameda County Long Term Care Planning Council
- 1997 99 Member, Long-Term Care Task Force, Extreme Care, Humane Options (ECHO), sponsored by Sacramento Healthcare Decisions
- 1996 97 Member, Consistency Advisory Committee, Division of Licensing and Certification, California Department of Health Services
- 1994 97 Member, Consumer Task Force, California Association of Health Facilities
- 1993 98 Member, Long Term Care Communication Coalition (with Stanford and California GECs, California Dept of Health Services, and Bureau of Registered Nurses)
- 1998 99 Medical Advisor, National Heritage Insurance Company (Medicare intermediary)
- 1993 98 Expert Medical Consultant, Medical Board of California
- 1999 Team leader, Performance Improvement Team on Patient Rights and Organizational Ethics, Summit Medical Center.
- 1998 99 Member, Summit Medical Center Ethics Committee
- 1993 99 Member, Summit Medical Center Utilization Management Committee
- 1998 99 Member, Summit Medical Center Pharmacy and Therapeutics Committee



- 1993 94 Member, Summit Medical Center Quality Assurance Committee
- 1987 91 Member, Highland General Hospital Quality Assurance Committee
- 1988 90 Negotiated merger of California Association of Interns and Residents (a loose federation of organizations) with Service Employees International Union.
- 1984 87 Member, UCSF Student Health Services Advisory Committee. Developed consumer satisfaction survey for Student Health Services.
- 1986 Evaluated San Francisco General Hospital Hospice Program, including analysis of staffing needs and design of data collection system and research projects.
- 1984 Performed site visits and compiled service and financial data for Community Clinic Survey conducted by the San Francisco Dept of Public Health.
- 1984 Member, Perinatal Needs Assessment Committee, a joint project of the San Francisco Department of Public Health and San Francisco General Hospital.
- 1983 Member, study team analyzing patient flow and waiting times at outpatient clinics at San Francisco General Hospital.
- 1981 1983 Developed and implemented biofeedback and stress management program at Alta Bates Hospital, Berkeley.



Cynthia Hom, MD

Associate Medical Director, Medical Review

Professional Experience

Associate Medical Director, Medical Review, Lumetra

- Supervises the case review work of clinical review specialists and physician reviewers as well as support staff to maintain timeliness and quality reviews.
- Supervises all levels of the clinical review of Utilization/Quality of Care issues (procedure and/or admission necessity) as well as DRG review to ensure reliable and valid reviews.
- Serve as a resource for external agencies and CMS staff to contact regarding case review issues.
- Reviews and develops QIPs from practitioners/providers. Works on collaborative projects with the population-based Quality Improvement department.
- Edits and develops correspondence to Medicare beneficiaries, health plans, practitioners, and providers to describe Case Review findings and to ensure the accuracy of the medical content. Prepares Administrative Law Judge Summaries and EMTALA documents with Case Review findings. Evaluates potential deliverables.
- Develop the training materials for physician reviewers/specialists involved in case review. Responsible for recruitment/credentialing of physician reviewers.
- Participated in PDSA Methodology and Kaizen Methodology.
- Member, UR committee.
- Committee for Quality Improvement for Practice Patients

Clinical Experience

Palo Alto Medical Foundation

- Maintains an active clinical practice in general internal medicine (in both academic and community settings). Clinical interests include travel medicine, women's health, geriatrics, and preventive medicine.
- Attending physician, involved in the medical care of outpatients and inpatients at Stanford Hospital.
- Collaborated with health educator in planning patient lectures, educational materials, and newsletters.

University of California, San Francisco Medical Center

 Staff physician and associate clinical professor, providing outpatient and inpatient care as well as occasionally serving as a preceptor to the medical students or residents.



 As a volunteer attending faculty at UCSF, served as a clinical preceptor to Internal Medicine medical residents/students and given feedback on the training program.

On Lok Senior Health Services

 Presented educational discussions about outpatient medical diseases to patients and ancillary medical staff.

Scientific Analysis

- Medical training in data analysis and interpretation as well as information on evidence-based medicine.
- As a medical student, was involved in both basic science (lupus) and clinical (psychology and healthcare utilization) research, including abstract presentation.

Education

- Completion of the General Internal Medicine Residency at University of California, San Francisco/Mt. Zion Medical Center, 1995
- Medical Doctor Degree, University of California at Los Angeles Medical School, 1992
- B.S. degree in Biological Sciences, UC Davis, with Minors in Linguistics and Psychology, 1988

Awards

- Phi Beta Kappa Honor Society 1988
- Phi Kappa Phi Honor Society 1988
- Phi Sigma Biological Honor Society 1988
- Golden Key Honor Society 1988
- Associate Clinical Professor of Medicine UCSF 1995



Susanne Jackson RN, BSN Director, Medical Review

Professional Experience

Director, Medical Review Business Unit

- → Provide leadership and guidance to the staff by assuring quality delivery of services and compliance with contractual obligations.
- → Supports the implementation of all aspects of fiscal, administrative and human resources programs in support of the needs and success of the Medical Review Business Unit.
- Provides expertise/guidance in the interpretation of Medicare requirements.
- → Manage Hospital Payment Monitoring Program and special project to reduce the number of unnecessary one-day stays in California hospitals.

Project Manager, Medicare Beneficiary Protection Quality Improvement Organization Support Center (MBP QIOSC)

- → Developed innovative methods and training materials to handle beneficiary complaints, and measure beneficiary satisfaction with the process, including mediation and case management.
- → Trains QIOs across the country in mediation and case management strategies.
- → Provides leadership and guidance to all personnel for the MBP QIOSC
- Responsible for managing all support QIO activities and meeting all contract deliverables including managing subcontractors who provide online training for beneficiary complaints and hospital issued noncoverage notices and subcontractors involved with introducing mediation into the beneficiary complaint process.

Review Case Manager of PIBS

- Managed a caseload of beneficiary complaints from intake through final response letter.
- → Coordinated the review process among healthcare professionals; maintained beneficiary/complainant contact; and drafted letters as required in the process.
- → Acted as member of review case management team in designing innovative aspects of the process, and updating policies and procedures.
- → Assumed role of team leader as required.

Director, Clinical Resource Management at Sutter Health

 Designed and implemented system that assigned Case Management units by Primary Care Physician to follow patients across continuum of care.



- → Member of core group responsible for implementation of service improvement to Medicare Managed Care patients.
- → Member of core group responsible for logistics of care map implementation.

Director, Case Management at Alta Bates Medical Center

- → Designed and implemented Case Management systems to follow patients under Medicare and Commercial contract to physician and hospital system.
- → Handled continuity of care for patients from admission to acute hospital through SNF stay and VNA care.
- → Responsible for 150 contracts.

Director, Pt. Care Management Services at Alta Bates/ Herrick Hospital

- → Planned and implemented merger of multi-department functions between two hospitals.
- → Designed and implemented nurse case management system key to reduction in Medicare length of stay by 1.0 days.
- → Added \$1 million increase in reimbursement to bottom line.
- → Added responsibility for oversight of hospital-based Skilled Nursing Facility, and Total Quality Management.

Licenses

California Board of Registered Nursing

Education

BSN, University of California, San Francisco

Awards

- Outstanding Leadership Award Hospital Council of Northern and Central California, 1988, 1989, 1990
- Department Manager of the Year Alta Bates Medical Center, 1995



Dexter Jung, PhD

Senior Scientists

Professional Experience

Biostatistician/Senior Scientist, Scientific Affairs 2003 – Present

- Plans, design, and implement Medicare Quality Improvement.
- Organizes analytical contract activities and health care studies, areas include quality improvement, utilization, and appropriateness of care.
- Select appropriate statistical analysis including sampling specifications
- Provides analytical support for internal quality improvement teams.
- Provides internal support for data protection review and consultation.

Manager, Scientific and Biostatistical Services 2002

- Directed the planning, design, and implementation of a comprehensive information system to support current and future business needs.
- Identified current and future company-wide information needs and necessary support.

Director Health Information Systems

- Developed and implemented information resource support.
- Evaluated information technology to support the management of health care data.
- Evaluated requests for proposals.
- Reviewed and developed proposals.
- Provided statistical consulting.
- Provided review and direction for company-wide operations.

Manager Biostatistical Programs 1997

- Responsible for the development and implementation of profiling and analysis of health care provider data.
- Managed staff and assigned projects.
- Provided technical oversight and guidance to data analysts and programmers including the use of statistical software, analytical methods, and use of data systems.

Senior Scientist Biostatistician 1993

 Worked with health care professionals in the analysis and interpretation of results.



- Analyzed, interpreted, and implemented Health Care Financing Administration National Projects at the state level.
- Interpreted and implemented HCFA contract specifications for health services research.

Senior Data Analyst Biostatistician 1990

- Interpreted and implemented HCFA contract specifications for health services research.
- Assisted in evaluation of request for proposals and contract bids.
- Represent CMRI at conferences and meetings.
- Problem-solving
- Project Management
- Initiated and participated in internal quality improvement of processes.

Consultant, County of Marin, Department of Health and Human Services

- Conducted a systems analysis and a feasibility study for the County of Marin Maternal, Child and Adolescent Health Program to implement a computerized information system.
- Prepared grant proposals.
- Supervised installation of selected system.
- Developed user guide.

Research Assistant 1975 – 1981

- University of California, Berkeley, School of Public Health, Berkeley, CA
- Stanford University, Department of Family, Community and Preventive Medicine, Stanford, CA

Education

- Doctor of Philosophy, Biostatistics 1988, University of California, Berkeley
- Master of Arts, Statistics 1974, University of California, Hayward
- Bachelor of Arts, Applied Mathematics 1971, University of California, Berkeley



Peter N. Kwok, PharmD

Consultant

PROFESSIONAL EXPERIENCE

Principal, January PNK & Associates San Ramon, California 2005 – Present

- Founding Principal of a California based healthcare consulting group, specializing in strategic consulting, clinical intervention, pharmaceutical and GPO contracting, and as an advisor to pharmaceutical manufacturers, managed care organizations, and provider groups on drug utilization management strategy and MMA and Medicare Part D Programs.
- Areas of consulting practice specialization: injectable biologics, formulary and utilization management, specialty pharmaceuticals and oncology/adjunctive drugs.

Vice President of Pharmacy, Injectable and Specialty Pharmacy Programs, Health Net Pharmaceutical Services, Oakland, California January 2004 – December 2004

- Led an expanded multidisciplinary program in strategic planning and execution of Health Net's multi-year corporate Specialty and Injectable initiative valued at approximately \$400 million annual spend.
- The scope of responsibility included facilitating and providing oversight on benefit design, provider and vendor contracting strategy, clinical utilization management, and claims process infrastructure improvement and integration activities in all Health Net regions, including California, Oregon, Arizona, New York, New Jersey, and Connecticut.

National Director of Pharmacy Services – Injectables and Specialty Pharmacy Programs, Health Net Inc.Health Net Pharmaceutical ServicesOakland, California September 2002 – December 2003

- Responsible for the strategic direction of injectable/biotechnology product development of all Health Net service regions, for a total of approximately 5.5 million lives.
- Led a multidisciplinary team to identify and implement an infrastructure to manage clinical utilization, distribution channel, claims adjudication, and benefit designs in order to optimize injectable therapy, balancing clinical outcome and affordability.
- Accomplishments included a successful launch of a collaborative pilot program in California in two phases in 2002 – 2003, in response to the Richman legislation, covering over two million lives.



Vice President, Pharmacy Health Plan of the Redwoods, Santa Rosa, California

March 1999 - August 2002

- As a member of the senior executive team of a regional health plan in Northern California, was responsible for strategic business development and medical management leadership policy decision functions.
- A key accomplishment was to lead a strategic initiative to design and implement a program, among the first in California, to integrate contracting and utilization management programs for injectable biologics under medical and pharmacy benefits.
- As the head of the health plan's pharmaceutical department, was responsible for the overall management of clinical, administrative, financial, and contractual functions of pharmaceutical benefits and the drug budget.
- Other duties include benefit design, healthcare delivery system oversight, strategic business development, and e-health initiatives.

Director, Health Care Delivery Systems, Asia Pacific Region United Health Care October 1997 – February 1999

 Responsible for new business development, provider network contracting, and implementation of new managed health care delivery systems and medical management strategy in the Asia Pacific Market, in a joint venture between United HealthCare and American International Group (AIG).

Associate Director, Corporate Clinical Pharmacy Programs and Pharmaceutical Contracting Blue Shield of California San Francisco, California

- Responsible for the development and management of corporate clinical pharmacy programs and pharmaceutical manufacturer contracting for Blue Shield of California, for approximately 2 million lives.
- Accomplishments included successful set up of a brand new pharmaceutical manufacturer rebate infrastructure, clinical pharmacy management program, and ancillary network contracting including home health and home infusion.

Director, Managed Pharmacy Programs Prudential Health Care Plan of Northern California San Mateo, California July 1994 – September 1995

 Responsible for the management of a regional managed care pharmacy program for the Northern California market, including regional operations management, liaison with medical groups, participation in drug formulary development, clinical intervention strategies, network development, contracting, co-promotion/co-branding activities with pharmaceutical manufacturers, and implementation of regional strategic provider network.

Manager, Clinical Pharmacy Services Take Care Health Plan, Concord, California March 1993 – June 1994

 Responsible for establishing a new corporate clinical pharmacy program and medical provider partnership, PBM liaison, benefit design, formulary



management, and drug vendor liaison activities for approximately 800,000 lives.

Clinical Pharmacy Administrator, Northern California Region Aetna Pharmacy Management Aetna Health Plans of Northern California, San Bruno, California February 1992 – February 1993

- Responsible for the initial set-up a new regional clinical pharmacy management program for the Northern California market as a result of Aetna's purchase of Bay Pacific Health Plan.
- Other duties include drug formulary development, medical group interface, and drug manufacturer intervention/co-promotion programs.

Assistant Director of Pharmacy, Ambulatory Services and County-wide Pharmaceutical Contracting County of Santa Clara, Santa Clara Valley Medical Center, San Jose, California, June 1989 – March 1992

- Responsible for the operation and administration of an ambulatory program
 including dispensing operation of six county-wide ambulatory services clinics
 throughout Santa Clara County with direct report of 60+ FTEs., and
 participated in Pharmacy & Therapeutics leadership functions
- Responsible for the negotiation and maintenance of pharmaceutical contracts for the County of Santa Clara.

Director of Pharmacy Services, North Bay Hospital Group North Bay Medical Center and VacaValley Hospital, Fairfield, California June 1985 – June 1989

 Served as the department head of a multi-site, community hospital group; responsible for all inpatient and ambulatory pharmacy administrative, budgetary, purchasing, quality improvement and JCAHO related activities.

Oncology Pharmacy Coordinator and Hospice Consultant Alta Bates Hospital Berkeley, California, September 1981 – June 1985

 Responsible for the implementation and management of decentralized oncology pharmacy services, and as a clinical consultant to the Alta Bates Hospice Program and pain management program.

Acting Director

Drug Information Service, Alta Bates Hospital Berkeley, California September 1980 – December 1980

Clinical Pharmacist

Alta Bates Hospital Berkeley, California June 1978 – September 1980

 Developed and implemented an oncology pharmacy program and served as clinical specialist in the symptom support multidisciplinary team.

Education

Doctor of Pharmacy, June 1978, University of California, San Francisco



- B.A., Bacteriology, June 1974, College of Letters and Science, University of California, Berkeley, California
- Honors: University of California Alumni Scholar 1970 1974

Professional Membership

- American Society of Health Systems Pharmacists (1974 Present)
- Academy of Managed Care Pharmacists (1992 Present)

Awards and Recognitions

- Golden Redwood Award for Outstanding Performance 2000 Health Plan of the Redwoods
- Outstanding Achievement Recognition 1996
 Blue Shield of California
- President's Choice Award Employee of the Quarter Award First Quarter 1994
- Quality Management Achievement Recognition 1991 TakeCare Health Plan
- Alta Bates Hospital Outstanding Employee of the Year Award 1984
- First Recipient of Alta Bates Oncology Program Award 1984
 Santa Clara Valley Medical Center



Mary Larson

Quality Improvement Advisor

Quality Improvement Advisor, Lumetra 2000 – Present

 Responsible for implementation of regional healthcare improvement projects within California, including developing and maintaining collaborations between QIO and healthcare providers.

Quality Outcome Services Department Manager Feather River Hospital Paradise, CA June 1998 – February 2000

 Responsible for Quality Management, Risk Management, Case Management, Social Services and Guest Relations. Responsibilities encompass the acute care setting, home health and Skilled Nursing settings.

Utilization Management/Quality Management Director Sierra Valley MSO Chico, ca 1997 – June 1998

 Responsible for planning, designing and implementing the Utilization and Quality Management programs for a newly formed Management Services Organization. Developed Utilization Management, Case Management, Quality Management, Member Services and Preventive Health Policies & Procedures. Contributed to provider office staff orientation. Developed Provider Manuals (primary author for hospital and physician manuals) and Medical Record Policies & Procedures.

Quality Management Enloe Hospital Chico, CA

Responsible for the Quality Management program, including quality improvement team formation, organization and facilitation, with the goal of enhancing optimal patient outcomes and improving efficiency through a reduction in the cost of care delivery. Heavily involved in identification of organization wide opportunities for improvement, review of utilization and care issues, and clinical pathway development with complementary physician order sets. Effectively led the team responsible for JCAHO preparation related to standards of organizational performance improvement. Achieved national certification as a professional in Healthcare quality.

Cardiovascular Care Coordinator Enloe Hospital Chico, CA

 Responsible for planning and designing the Cardiovascular Surgery Service program, including development, management and coordination. Heavily involved in utilization and quality management related to this population, leading efforts to improve patient outcomes and reduce costs. Developed educational curriculum and printed/audio-visual materials for patients, staff (nursing and respiratory therapy) and the community.



Department Manager, Critical Care Enloe Hospital Chico, CA

 Responsible for planning, designing and managing the Trauma/Surgical Intensive Care Unit and the Neurosurgical Care Unit. Managerial responsibilities included 24-hour staffing, performance evaluations, annual budget, etc. Other responsibilities included teaching in-house and referring professional staff content related to care of the critically ill patient.

Staff/Charge Nurse Enloe Hospital Chico, Ca 1977 – 1978

Education

- California State University, Chico, CA
 - → Adult health focus with strong emphasis on adult education. Graduation with Distinction. Nominated for best thesis work by the School of Natural Sciences.
 - → Bachelor of Science Degree in Nursing 1977
 - → Nursing care and leadership focus. Phi Kappa Phi, Honor Society. Dean"s List, 1972 through 1977.

Skills

- Quality Management/Performance Improvement
- Case Management/Outcomes Management
- Medical Record Review
- Performance Improvement/Quality Management
- Data Management/Statistical Process Control
- Computer Use (Software experience with word processing, database development and management and presentations graphics)

License, Certification, and Honors

- Registered Nurse 1977 to Present
- Registered by the State of California, Board of Registered Nursing, License Number RN 284016
- Certified Professional in Healthcare Quality (CPHQ) 1996 to Present
- HealthCare Quality Certification Board, Director 1998 to 2002
- Excellence in Nursing Award1992
- Awarded by the Sigma Theta Tau International Honor Society of Nursing, Kappa Omicron chapter



Ju Ruey-Juian Lee, PhD

Senior Scientists

Professional Experience

Senior Scientist Scientific Affairs Lumetra 2004 – Present

- Lead Biostatistician supporting Nursing Home Quality Initiative (NHQI),
 Promoting Use of Nursing Home Performance Data, and Other
 Mandated Communication Support task forces within CMRI
- Support Lumetra Managed Care task force on request of sample size determination, project monitoring and project design
- Plan profile analysis work of nursing homes in California
- Recommend focus and strategy to meet contract evaluation criteria for NHOI
- Analyze new formulated quality measures established by Center for Medicare and Medicaid Services (CMS) for nursing homes and provide the interpretations to various audience in California
- Provide consultation to formation of customer satisfaction survey and analysis
- Internal expert on Minimum Data Set (MDS) data content

Biostatistician Operational Support Services 2002 – 2003

- Provide statistical consultation to design and evaluation of quality improvement projects in California
- Member of the Lumetra Medicare+Choice Quality Review Organization (M+CQRO) Review Team evaluating QAPI projects for the Centers for Medicare & Medicaid Services (CMS) for 17 states and four CMS Regional Offices
- Provide technical input to improve the methodology and design of reviewed QAPI projects and recommend corrective action plans to CMS when needed
- Share technical consultation with CMS on Lumetra's experience with quality improvement project design and execution practiced in California
- Act as senior and third party consultant for other Quality Improvement Organizations advising design of QAPI projects in the assigned M+CQRO states
- Analyzed the CMS quality chapter to provide guidance to the M+CQRO review teams on QAPI performance targets and benchmarks
- Review data reports from CAHPS, HEDIS and other M+CO survey studies for their applications and implications in QAPI projects

Biostatisician Health Information System 1999 – 2001

- Initiate data mining investigation using regression algorithm to identify insurance claims with potential payment errors
- Lead analytical team



- Provide core statistical support for design and conduct of major Payment Error Prevention Program (PEPP) using SAS and other statistical software
- Identified and modified study foci for PEPP projects
- Conduct risk assessment analysis
- Write up statistical reports
- Supervise data transmission between/among different templates
- Design and team up with application development group to develop a relational database for progress tracking of a long-term major program

Senior Investigator

Biometrics Ischemia Research and Education Foundation, San Francisco, CA

1998 - 1999

- Statistical analysis of Phase II & III clinical trials
- Data evaluation of ongoing Phase III clinical trials
- Clinical trial design consultation
- Complex SAS programming consultation support
- Designed, conducted and managed a cost-effective outcomes research project to examine extended effect of trial medication post perioperative time period
- Interacted with 45+ US medical centers & Internal Review Boards for human subjects research approval
- Supervise project members; Monitor project progress

Epidemiologist Biometrics

2002 - 2003

- Analyzed multiple clinical trial databases (9+)
- Assembled various clinical trails data sets for follow-up study
- Initiated and established contract with Health Care Financing Administration office for acquisition of Medicare data

Research Associate (faculty track)

University of Texas, M.D. Anderson Cancer Center, Houston, TX 1995 – 1996

- Built risk assessment model for breast cancer recurrence research proposals
- Co-investigated various clinical outcomes projects involving carcinoid tumor

Research Specialist

Section of Clinical Cancer Prevention, Division of Cancer Prevention 1993 – 1995

- Compiled state-wide screening mammography survey data
- Determine data capacity for various research objectives
- Guided data analysis and published administrative and scientific reports
- Developed new research projects focusing on breast cancer prognosis

Post-Doctoral Fellow

Department of Epidemiology, School of Public Health, University of Texas at Houston, Houston, TX 1992 – 1993



- Reorganized longitudinal follow-up data of a large cohort of patients of project interest
- Composed programs for data linkage, transformation, and statistical analysis
- Performed complex statistical analysis including Cox regression, Poisson regression, person-year calculation, direct and indirect adjustment of the incidence rates
- Generated reports of statistical results and co-authored scientific reports

Project Director Department of Epidemiology 1993 – 1995

- Directed scientific and financial issues
- Designed Case Report Form
- Established arrangement for confidential data transmission with various State health departments
- Oversaw data collection and quality assurance
- Developed linkages to manage data across different computer statistical templates
- Performed baseline descriptive and comparison analysis and all nonparametric and parametric modeling of survival data

Statistician

Information Management Center

1989 - 1990

- Conducted statistical analysis of quality assurance studies and clinical trials
- Consulted on design and analysis plan of new study
- Developed new quality assurance studies

Project Manager Department of Epidemiology 1988 – 1990

- Built up outreach and data collection system
- Managed project budget and personnel
- Designed case report form; Set up field stations
- Monitored data quality; Performed data analysis
- Conducted literature search and review
- Performed meta-analysis
- Prepared final scientific and administrative project report, co-authored scientific paper

Graduate Research Assistant School of Public Health Library, Houston, TX 1988

Independent Consultant Lexington, KY, Houston, TX 1983 – 1987

- Survey design consultation
- Linguistic assistance in survey tool translation
- Statistical analysis service



Contract Researcher Taipei Municipal Health Department, Taipei, Taiwan, R.O.C. 1983 – 1987

- Design and Conduct a Health Survey of the Metropolitan Taipei Senior Citizens
- Assist in design and establishment Health Education Programs for Rural Areas

Education

- Doctor of Philosophy, Epidemiology, University of Texas Health Science Center at Houston, School of Public Health, Houston, TX 12/92
- Master of Arts, Community Health, National Taiwan University, Institute of Public Health, Taipei, Taiwan 6/81
- Bachelor of Arts, Public Health, National Taiwan University, Department of Public Health, Taipei, Taiwan



Patricia Lin, MPH

Healthcare Data Analysts II

Professional Experience

Healthcare Data Analyst II, Lumetra 12/2003 – Present

- Provide analytic support to multidisciplinary teams through data analysis and interpretation; lead analyst for Hospital Project Team
- Analysis of data from various sources to identify opportunities to improve care of beneficiaries and monitor progress towards improvement goals

Research Statistician VA Puget Sound Health Care System, Seattle, WA 12/2000 – 12/2003

- Conducted health economics and outcomes research on several studies including diabetic patients, depression intervention trial, and assisted living pilot project
- Research, conduct statistical analyses, and interpret data results of treatment, inpatient & outpatient resources, pharmaceutical utilization, and cost of care

Research Scientist University of Washington, HPV Research Group, Seattle, WA 7/2001 – 12/2002

- Epidemiologic data analyses and interpretation on studies of cervical neoplasia, CD4+ levels
- Literature reviews, meeting presentations, co-authored papers, trained assistants

Research Associate/Statistical Programmer Trinet Employer Group, Palo Alto Institute for Research and Education, Menlo Park, CA 2/2000 – 12/2000

- Prepared and analyzed datasets on health care utilization and costs
- Validated large national computerized cost-allocation database
- Evaluated efficiency of ongoing programs and providers

Graduate Research Assistant University of Washington, HPV Research, Seattle, WA 6/1998 – 11/1999

- Conducted epidemiologic research on genetic susceptibility to cervical cancer
- Proficient in PCR-based genomic DNA typing and data interpretation
- Statistical analyses, literature reviews



Graduate Research Assistant

University of Washington, Fred Hutchinson Cancer Research Center, Seattle, WA

02/1998 - 05/1998

- Assessed quality of life among breast cancer survivors in community-based mammography intervention trial
- Data analyses (SAS statistical programming)

Senior Research Technologist University of New Mexico Cancer Research & Treatment Center at Roche Molecular Systems, Alameda, CA 10/1995 – 07/1997

- Experienced in DNA/PCR-based genetic (HLA) typing of patients with cervical cancer, nasopharyngeal carcinoma, HIV
- Conducted detailed data interpretation
- Assay development; trained summer student/intern

Laboratory Assistant III University of California, Department of Integrative Biology, 06/1994 – 09/1995

- Assisted in population-based epidemiologic research examining genetic components of multiple sclerosis.
- Experienced with DNA extraction, PCR and PCR-based typing methods, DNA sequencing.

Education

- MPH, Epidemiology, University of Washington 1999
- BA, Molecular and Cellular Biology University of California Berkeley 1994



Antonio P. Linares

Vice President, Medical Affairs

Professional Experience

Vice President Medical Affairs, Lumetra 2004 – present

- Provide direction, leadership and management of Medical Affairs Group, which includes medical directors in quality, informatics, and Medicare medical case review.
- Serve as the leader for national Medicare demonstration projects including the adoption of electronic health records, practice redesign, and chronic disease management.
- Serve as national and statewide physician champion for Doctors Office Quality – Information Technology (DOQ-IT) project. Lead collaboration with the American Academy of Family Physicians, the American College of Physicians, and the American Medical Association.

Medical Director - Quality Improvement, Lumetra 2002 – 2004

- Served as senior physician lead on multidisciplinary teams across various clinical settings (physician offices, hospitals, nursing homes and managed care health plans).
- Provided clinical leadership in statewide Institute for Healthcare Improvement (IHI)-type collaborative projects.
- Developed a statewide Physician & Clinical Champion Network to support chronic care initiatives and QIO collaboratives and to accelerate adoption of evidence-based practices.
- Recruited and trained physician chairs and clinical experts for collaborative projects based on the IHI model and the Chronic Care model.

Senior Medical Advisor, California Department of Managed Health Care 2000 – 2002

- Provided executive leadership to the DMHC's Office of the Director on clinical and quality standards for health plan oversight (52 HMOs with 22 million California members).
- Served as the senior physician lead on strategic planning & HMO policy review teams.
- Served as the Chair of the Clinical Advisory Panel of statewide experts and thought leaders to promote evidence-based practices and patient safety.
- Developed the quality review system for the Independent Medical Review (IMR) program. Note: California was the "first in the nation" to post outcomes analysis results online).
- Researched emerging technologies and reviewed IMR trends with U.C. San Francisco and



- U.C. Davis faculty to advise HMO medical directors on medical policy changes.
- Lead physician for Department of Health Services/DMHC efforts to develop e-disease management provider systems.

Vice President of Medical Affairs, Adventist Health, Paradise Valley Hospital 1999 – 2000

- Led executive medical teams for Adventist Health West (hospital medical directors).
- Established the role of Vice President for Medical Affairs at Paradise Valley Hospital.
- Developed the first Hospitalist Program in South San Diego to manage high emergency room volume.
- Recruited three hospitalists for inpatient care and retained a program consultant.
- Reduced Medicare hospital admissions by 40% and decreased financial losses by more than one million dollars per quarter during the first year of operation.
- Restructured the Performance Improvement department in preparation for JCAHO review and trained medical staff on clinical data analysis and outcome measures for APR-DRGs.

Vice President, CIGNA HealthCare; Hartford, CT and Medical Director, CIGNA HealthCare, San Diego 1996 – 1999

- Led the national office medical cost review and HEDIS performance team.
- Created a balanced scorecard to profile the medical costs and action plans of 45 markets.
- Prepared market data analysis of medical and PMPM cost results for senior management.
- Led the Medical Action Planning (MAP) team in ten state market reviews including NCQA, HEDIS, and total medical costs.
- Cigna's cost management performance exceeded most national HMOs for two years.
- Led the NCQA team in the San Diego Health Plan and achieved three-year accreditation.

Vice President and Chief Medical Officer, OSF Health Plan; Peoria, Illinois 1995 – 1996

- Developed the medical administration for a new HMO and integrated Catholic Health Care System (seven hospitals in three states and 160 owned practices).
- Assisted the president of the health system and board chair on key strategic decisions.



- Led statewide physician advisory groups and quality improvement teams.
 Also directed network growth into new Illinois markets.
- Recruited and trained the next VP-CMO before returning full-time to California.

Medical Director, Community Health Group (CHG)¹, San Diego, CA 1993 – 1995

- Developed the quality and UM programs for the commercial product DOC filings. Recruited IPA and medical group support to expand the FQHC provider network
- Developed the Nurse Telephone Triage program and recruited physician back up.
- Trained medical directors of community clinics and expanded the CHG network.

Medical Director, Aetna Health Plan of San Diego 1991 – 1993

- Transitioned the medical network from the Greater San Diego Plan after Aetna's purchase.
- Integrated the HMO and Indemnity/PPO product lines into a single medical unit.
- Led Aetna's national infant immunization campaign with a kick-off in San Diego by the Surgeon General and Secretary of Health and Human Services. Also attended White House ceremonies led by President George H. W. Bush.
- Developed Aetna's first diabetes disease management program.

Medical Director for CHG and solo clinical practice in Chula Vista, CA 1988 – 1991

- Served as medical director for Community Prime Care (PCCM) in early HMO expansion and opened the first PCCM/FQHC sites in Southeast San Diego.
- Developed health plan medical management team and quality management programs.
- Hospital privileges at Scripps and Sharp Community hospitals in Chula Vista
- Served on Medical Executive Committee at both hospitals.
- Served as medical consultant at Vista and Southwood psychiatric facilities.



San Ysidro Health Center (FQHC) National Health Service Corps; San Diego, CA 1984 – 1988

- Family practice leader in large FQHC serving predominantly Latino population.
- San Ysidro Health Center was the first Medicaid Primary Care Case Management (PCCM) to contract with the State of California.

Education

- Family Practice Residency University of California, Davis Medical
- CenterAmerican College of Physician Executives (164 hours)
- Medical degree, Case Western Reserve University School of Medicine, Cleveland, Ohio
- Bachelor's degree in immunology and immunogenetics, Defiance College, Defiance, Ohio



Kathryn A. Lowell

Vice President, State Business

Professional Experience

Vice President Business Development, Lumetra May 2005 – Present

- Executive responsible for state business, product development, and strategy development.
- Provide key strategy on growth efforts and business opportunity management.
- Identify opportunities and direct efforts for public-private sector partnerships specific to health care consulting services, data analysis and evaluation, quality improvement market expansion, and technology outsourcing.
- Assist efforts to build a new electronic medical record division. Interface with key government leaders to grow the company's programs.

Vice President, Marketing MAXIMUS (NYSE:MMS), Sacramento, California November 1998 – April 2005

- Vice President of Marketing for a government consulting and outsourcing firm with revenues of \$650 million and clients in all 50 states.
- Responsible for government contracting, product development, and business development. Played key role in MAXIMUS' revenue growth, particularly in California.
- Identified opportunities and developed strategy for partnerships specific to consulting services and technology outsourcing.
- Created public relations strategies and manage association participation.
 Managed western-region legislative action.
- Provided consulting services to specific MAXIMUS projects and marketing efforts in the Western region including: Managed Care Enrollment for Medi-Cal; Worker's Compensation Independent Medical Review; Physician Profiling; and Medical Peer Review.

Assistant Secretary for Program and Fiscal Affairs Health and Human Services Agency, Sacramento, CA August 1995 – November 1998

- Fiscal and policy oversight responsibility of the Medi-Cal program, pharmaceutical programs, licensing and certification of health facilities, and long-term care programs.
- Supervised the development and implementation of major policy initiatives.
 Negotiated funding issues and legislation.
- Approved provider contracts and program strategies as representative to the Managed Risk Medical Insurance Board.
- Mediated and resolved differences among departments and constituent groups.



- Analyzed budget proposals, regulations, legislative proposals and other public documents.
- Advised the Agency Secretary on program issues.

Special Assistant for Health Reform Department of Health Services, Office of the Director, Sacramento, CA January 1994 – July 1995

- Developed health reform strategies for the State of California.
- Advised Director on health policy fiscal matters. Analyzed health reform legislation affecting insurance, managed care and hospital industries.
- Marketed program developments to constituencies.
- Represented the Director and spoke to constituencies regarding the Administration's positions on health care issues.
- Managed research and support staff. Advised the Governor's Council on Information Technology on matters pertaining to health care.
- Provided staff assistance for the Governor's Council on Biotechnology.

Health Policy Researcher Office of Statewide Health Planning and Development, Sacramento, CA December 1992 – January 1994

- Analyzed health reform legislation and provided recommendations for position.
- Wrote regulations to implement the uniform billing format legislation passed in 1992 to simplify the administration of health care.
- Represented California State before the Workgroup for Electronic Data Interchange.
- Chaired a public policy committee to explore the impact of building a proposed \$17 million statewide health electronic data interchange to collect encounter-level data and perform financial transactions for health care insurers and managed care plans.
- Authored report on the distribution of magnetic resonance imaging technology in California.

Legislative Analyst U.S. House of Representatives, Congressman Richard Schultze, Washington D.C.

September 1988 – October 1992

- Advised Member on Ways and Means Committee policy issues.
- Drafted legislation to alter Medicare reimbursement rates, to expand certain Medicare benefits, to prevent Medicare abuse, to simplify employee benefit rules, to fund retiree health benefits, and to expand managed care networks.
- Negotiated Member's amendments during budget reconciliation.
- Represented Member at speaking engagements and before constituencies.
 Developed position papers and wrote articles on selected domestic issues.



Special Assistant to the Assistant Secretary for Import Administration U.S. Department of Commerce, International Trade Administration, Washington D.C.

,August 1987 - August 1988

Evaluated applications for foreign-trade zones and made site visits.
 Prepared reports on zone applications involving an analysis of the economic impact on domestic industries, regional development and employment.

Intern

U.S. Securities and Exchange Commission, Washington Regional Office June 1985 – August 1985

 Investigated various insider-trading cases. Interviewed individuals, authored independent reports, and examined stock purchases to discover discrepancies indicating possible fraudulent security exchanges.

Education

- Program for Senior Executives in Government, Selected scholarship winner, Harvard University/JFK School of Government
- Masters in Public Administration with health care emphasis, awarded academic scholarship, University of Southern California
- Bachelor of Arts in International Relations, Stanford University

Organizations and Positions Held

- UC Davis Health System, Center for Health Services Research, Board Advisor (1998-2005)
- LEAD21: Bay Area Political Membership Organization for Young CEOs and VPs (2005)
- National Alumni Reunion Chair, Stanford University (2003)
- WITI: Women In Technology International: Member (2000-2005)
- Stanford University Club of Sacramento: President (1997) & Board of Directors (1993-2001)
- California Taxpayers Association Board of Directors: (1999-2001)
- Stanford Exchange for Public Service: Board of Directors (1988-92)

Awards

- Harvard/Kennedy School Scholarship Recipient: Senior Executives in State & Local Government
- Stanford University Award of Outstanding Volunteer Achievement
- Ides of March Academic Scholarship
- American Association of Budget and Program Analysts Achievement Award



Lanz R. Lowen

Consultant

Professional Experience

Independent Consultant

- Expert consulting services in organization development, interpersonal psychology, and leadership development to individuals, teams and organizations.
- Clients include Applied Materials, Apple Computer, BALiF, Bobrick, Cardinal Business Media, Dey Laboratories, DIVA Systems, Health Dimensions, Inc., Hitachi Instruments, IBM, Kaiser Permanente, Levi Strauss & Co., Lindsay's, LVMH, Lumetra, Mervyn's, Midwest Center for Non-Profit Leadership, Nestle Beverage Company, Palmer College of Chiropractic, PolicyLink, Reliance Housing Foundation, Safeway, Sandia Laboratories, Sybex, Stupski Foundation, UCSF, and UC Berkeley.
- Helps organizations find competitive advantage by enhancing their abilities to think strategically, creatively problem-solve and align cohesively toward a desired direction.
- Works with leaders and teams to clarify purpose, define strategic priorities, resolve conflict, increase influence and effectively implement organizational change.

Adjunct Staff Member/Facilitator

- Stanford University Graduate School of Business
- Stanford's Leadership Development Program

Adjunct Staff Member JFK University Coaching Certificate Program

Adjunct Staff Member Catalyst Consulting Team

- Facilitates leadership development programs and team building retreats.
- Current and previous clients include Autodesk, Chevron, Cisco Systems, HP, Price Waterhouse, Silicon Graphics, San Jose State University, Southern California Gas Company, Sun Microsystems, Sybase and Xerox.

Manager of Organization Development and Training Mervyn's Department Stores Corporate Headquarters

- Assisted senior managers strategize and communicate shifts in organization direction and culture.
- Introduced quality and work improvement programs.
- Designed and implemented a corporate-wide survey feedback process to help managers modify leadership style.



Education

- Master's degree in industrial and organizational psychology, San Francisco State University
- Master's degree in clinical psychology, Professional School of Psychology, San Francisco.



Edward M. Lukawski, MD

Vice President, Medical Affairs

Professional Experience

Associate Medical Director, Lumetra February 2004 – Present

- Assists in the day-to-day operations and management of the medical case review program for health care provided to Medicare beneficiaries in California.
- Responsible for recruitment, credentialing, and recredentialing of peer reviewers comprising our panel of over 350 California practitioners from the entire spectrum of health care.
- Oversees the process that results in medical case review determinations through the peer review process.

Medical Director Lifeguard Health Plan, Milpitas and Stockton, CA August – December 2002

 Assisted with all phases of medical services operations at a satellite office of this fee-for-service model health plan with about 180,000 members. The California State Department of Managed Health Care placed this plan in conservatorship in September, 2002, and is in the process of dissolving it.

Vice President and Senior Medical Director Mills-Peninsula Medical Group, Burlingame, CA 2001-2002

- Senior physician responsible for all aspects of medical management (Utilization Management, Quality Improvement, Credentialing, Grievances and Appeals, and Regulatory Compliance) for physician-owned Independent Practice Association of 350+ providers in partnership with major health plans and a well-regarded community hospital.
- Created and implemented a comprehensive UM program for outpatient cardiology services that improved communication between specialists and primary care physicians.
- Led efforts to improve physician compliance with clinical and administrative programs through regular meetings of primary care physicians.

Medical Director/ Chairman, Pharmacy and Therapeutics Committee Blue Shield of California, San Francisco, CA 1997 - 2000

- Provided physician support for time-sensitive medical management activities and medical group oversight in Northern and Central California, including utilization management, quality improvement, credentialing, grievances and appeals, and provider relations.
- Created and maintained strong relationships between Blue Shield and medical management staffs at partner medical groups.



- Led credentialing committees for evaluating HMO providers in non-delegated medical groups.
- Concurrently led the statewide Pharmacy and Therapeutics Committee and served as the in-house medical consultant for the Pharmacy Services Department.
- Partnered in the creation and development of processes related to the management of the closed formulary.
- Provided education for pharmacists and technicians.

Associate Medical Director Alta Bates Medical Group, Berkeley, CA 1994 – 1997

- Provided physician support for all medical aspects of medical group management, including utilization management, quality improvement, credentialing, and provider relations.
- Collaborated effectively with physicians and staff, improving staff morale and productivity. Improved utilization management processes, resulting in more timely delivery of care.

Medical Director QualMed Plans for Health/HealthNet, Oakland, CA 1992 – 1994

- Provided support for the full range of medical management activities.
- Developed processes for addressing clinical quality concerns, resulting in greater empowerment of key nursing staff.

Physician Advisor and Part-time Medical Director Utilization Management and Quality Improvement Organizations California, Maryland, Virginia, and Washington, DC 1988 - 1992

 Provided physician support for utilization management and quality improvement activities. Entrepreneurially created and directed a network of peer reviewers from a wide variety of healthcare disciplines, including chiropractic.

Assistant Professor, Division of Emergency Medicine and Trauma Staff Physician, Emergency Department, Johns Hopkins Hospital Johns Hopkins School of Medicine, Baltimore, MD 1984 – 1989

 Directed the emergency department's quality assurance program, achieving full accreditation. Created and directed clinical emergency medicine curricula for medical students.

Staff Physician Community Hospital Emergency Departments, 1979 - 1984 Northern and Central California



Fellowship In Emergency Medicine University of California at San Francisco,1977 – 1979 San Francisco, CA

Internal Medicine Residency Case Western Reserve University, Cleveland, OH 1975 – 1977

Education

- Medical degree, Harvard Medical School, Boston, MA
- A.B., Harvard College, Cambridge, MA

Professional Affiliation

American College of Physician Executives

Certifications

- California License: G354511977
- Diplomate
 - → American Board of Internal Medicine, 1978
 - → American Board of Emergency Medicine, 1984 1994
 - → American Board of Quality Assurance and Utilization Review Physicians, 1990



Susan S. Merrill, PhD

Director, Scientific Affairs

Summary of Experience:

 Ms. Merrill is an epidemiologist with 20 years of experience in designing and conducting public health research and evaluation in academic and QIO settings. She analyzes Medicare claims, enrollment, and case review data, and presents results in peer-review publications and at national conferences.

Relevant Experience

Lumetra Director, Scientific Affairs, 2005 - Present

- Serves as chief scientist for Lumetra, providing leadership and management to a team of 15 professionals in the areas of biostatistics, epidemiology, data management, and related analytic disciplines.
- Leads the Scientific Affairs Business Unit in the development of scientific research objectives and assesses grant opportunities to help Lumetra meet its strategic goals.
- Analyzes current research techniques and evaluates applicability to the work of the company.
- Assumes a lead role in communicating Lumetra's scientific expertise to customers and external audiences through abstracts, manuscripts, and presentations.
- Evaluates current trends and developments in the analysis of healthcare data, including the technological advances to support the acquisition, management, and access of healthcare data.

Senior Scientist

LumetraEpidemiologist/Project Manager, 1996-2005

- Developed, implemented, analyzed, and evaluated national inter-rater reliability project for case review.
- Led Scientific Affairs team in Doctor's Office Quality Information Technology (DOQ-IT) project.
- Responsible for coordinating work activities, providing analytical and evaluation support, developing surveys and database structure, assuring the timely completion of Scientific Affairs' tasks, and developing and completing activity reports.
- Managed mammography and preventive services quality of care improvement campaigns; responsible for all aspects of project management.
- Developed, implemented, analyzed, and evaluated beneficiary satisfaction with medical record review and mediation of complaints regarding quality of care.
- Provided strategic planning and execution for project plans, methodological design, data analyses, organization with other departments, writing/editing reports, quality assurance with respect to governmental guidelines, and writing/monitoring subcontracts.



- Led multidisciplinary teams in quality improvement project and department planning, interfacing with senior management, assigning tasks, and tracking progress.
- Designed and conducted evaluations to assess efficacy of interventions and project processes and outcomes.
- Provided analytical and methodological expertise for clinicians and other departments.
- Developed, wrote, and submitted proposals for external funding. Presented data and analytical results to senior management and at scientific meetings.

Manager

Lumetra Epidemiologic Programs, 1997-1998

- Managed staff of data analysts. Responsible for management, performance reviews, and personnel decisions for six analysts.
- Provided design support and analytic guidance for analysts' quality improvement and analytic projects.

Institute of Gerontology, University of Michigan

Post-doctoral Fellow, 1994-1996

 Wrote and received competitive Federal grant to study physical health, disability, and quality of life among older adults. Managed project and budget, developed analysis plans, and analyzed data for analytic projects in the areas of arthritis and physical disability. Co-wrote grant proposals.
 Trained and supervised one graduate student and two research assistants.

Yale University

Research Associate/Assistant, 1987-1993

- MacArthur Studies of Successful Aging Project and New Haven Established Populations for Epidemiologic Study of the Elderly Study, Yale University.
- Responsible for questionnaire development, primary data collection, tracking laboratory results, data coding and cleaning, developing analytic strategies, and data analyses. Assisted in writing numerous publications and several grant applications. Presented analytic findings on physical disability in the elderly at scientific meetings. Supervised two research assistants.

Tutor - Department of Epidemiology and Public Health, 1986-1992

 Provided assistance in SAS programming to individuals and small groups (2-5) of students at master and doctoral levels. Provided assistance in epidemiological methodology and design to individuals and small groups of graduate students.

Data Analyst

Intergenerational Giving Study, Yale University 1988

- Analyzed three waves of New Haven Established Populations for the Elderly data to determine patterns of financial, emotional, and physical support between generations.
- Developed analytical plan for the analysis and drafted methodological outline with respect to data analysis.



Research Assistant

Department of Community Health, University of California, Davis (UCD) 1985-1986

- Conducted reviews and synthesized literature for two grant proposals in the area of Alzheimer's disease.
- Drafted background section of one paper on Alzheimer's disease.
- Assisted families of Alzheimer's disease patients at the UCD Medical School to complete questionnaires regarding patients' disease progression and support systems.

Education

- Doctor of Philosophy, Epidemiology, Yale University, New Haven, CT, 1993
- Master of Public Health, Health Policy/Epidemiology, Yale University, New Haven, CT, 1998
- Bachelor of Science, Community Health and Aging, University of California, Davis, Davis, CA, 1985

Highlights of Experience

- Nine years of Medicare data analysis
- Design and implement Medicare Quality Improvement (QI) projects and their evaluation
- Design case review specifications for Iowa Foundation for Medical



Rita Mistry, MPH

Senior Project Manager, Scientific Affairs

Professional Experience

Senior Project Manager, Scientific Affairs, Lumetra 12/2003 – Present

- Supervise program effectiveness, objectives and deadlines to ensure the team's endeavors are meeting goals
- Identify the organization's current data analytical needs and arrange necessary support with team members and vendors
- Anticipate and evaluate future business needs and makes proposals and plans to support identified requirements
- Coordinate the development of grant applications and contract proposals with the team staff
- Uses Continuous Quality Improvement (CQI) methods to ensure department is providing top quality service

Program Supervisor, Analyst II 3/03 – 12/03 UCSF/San Francisco General Hospital Medical Center (SFGHMC), San Francisco, CA

UCLA Health & Media Research Group, UCLA School of Public Health, Los Angeles, CA

- Implemented and evaluated highly complex statewide public health program initiatives including the setting of objectives, planning methods to achieve them, and working with health professionals at the state and local levels in the accomplishment of objectives
- Managed and coordinated organizational infrastructure, activities and projects for the SFGHMC breast services and the Avon Advocacy and Support Network (ASSN)
- Assisted in managing marketing/communications components of the Avon/UCSF breast cancer social marketing campaign and projects directed at healthcare community and medically underserved patient population, including concept and strategy development, planning, testing, design, production, dissemination, and evaluation

Research and Evaluation Specialist AIDS Project Los Angeles, Los Angeles, CA 08/2002 – 02/2003

- Conducted agency-wide evaluation needs assessment for HIV/AIDS education, prevention and care services programs for at-risk and minority populations;
- Wrote evaluation plans (including program goals and objectives) and designed evaluation instruments (needs assessments, surveys, pre/posttests, databases, etc.) for HIV/AIDS education, prevention and care services programs



- Worked closely with project teams, serving as team member, team leader, facilitator, project leader and/or account manager to internal clients
- Conducted research related to projects, including needs assessment, literature review, focus groups and interviews
- Prepared media collateral materials, press releases, presentations, speeches, posters, articles, and other materials for external audiences (oversaw creation of slides, PowerPoint presentations and other visual materials to support presentations)
- Developed targeted messaging and positioning, and conducted media outreach to broadcast, print and online media
- Assisted in fiscal management of external client accounts
- Oversaw the work of professional staff by making and reviewing work assignments, establishing priorities, coordinating activities, and resolving related work problems

Senior Account Executive Allison & Partners (formerly Connors Communications), San Francisco, CA 10/2000 – 07/2002

- Wrote strategic public relations and marketing plans for health care and technology clients
- Prepared creative briefs, project plans and timelines, and cost estimates for all communications materials in collaboration with project teams
- Coordinated extensive review with client staff and external consultants/collaborators, and ensured quality control of all materials
- Worked closely with project teams, serving as team member, team leader, facilitator, project leader and/or account manager to internal clients
- Conducted research related to projects, including needs assessment, literature review, focus groups and interviews

Account Executive Porter Novelli, San Francisco CA 01/2000 – 09/2000

- Assisted in development, implementation and maintenance of communication strategies for clients
- Wrote, distributed and pitched story ideas to the media in a variety of forms, with each story customized to meet the needs of the content and the appropriate media outlet
- Developed and distributed press kits for client promotion
- Prepared quarterly reports on the state of client communications programs for presentation at executive staff and board meetings
- Monitored all relevant client media coverage and managed clipping vendor who tracked client media placement
- Created and maintained a media database for specialized media outlets.
- Conducted research related to projects, including needs assessment, literature review, focus groups and interviews



Manager, Grant Proposal Development/Health Educator Planned Parenthood Los Angeles (PPLA), Los Angeles CA 01/1999 – 12/1999

- Prepared requests for proposals, program agreements, and related materials for soliciting and establishing state supported health programs
- Provided fiscal management, determined resources required to meet goals of specific projects and developed budgets
- Managed the organizational structure and maintenance of grant development;
- Wrote grant proposals and submissions to RFPs
- Assisted in community health program research, planning, development and education (teen safe sex education; HIV/AIDS prevention; substance abuse education)
- Conducted educational workshops and focus groups for youth populations
- Developed educational messaging for regional and national media outreach
- Kept apprised of pending legislative, political activity, current events and statistics affecting access to reproductive health care
- Assisted in the production of legislative information and quarterly newsletter

Program Coordinator & Liaison Louisiana Office of Public Health, New Orleans, LA Tulane University School of Public Health and School of Medicine, New Orleans, LA

- Assisted in development and management of community health education/social marketing campaigns: Partners for Healthy Babies, Louisiana Head Start Program, Great Expectations, Sudden Infant Death Syndrome;
- Designed health assessments, pre/post test surveys, reports and educational materials
- Facilitated health education information sessions and focus group interviews with medical students and undergraduate students

Education

- Master of Public Health, Community Health Sciences Concentration: Health Education and Communication 5/98
 Tulane University School of Public Health and Tropical Medicine, New Orleans, LA
- Bachelor of Arts, Biochemistry and Cell Biology University of California San Diego, La Jolla, CA



Glen Moy

Project Manager

Professional Experience

Project Manager, Lumetra April 2004 – Present

- Assisted in the development of the Doctor's Office Quality-Information Technology (DOQ-IT) national electronic health record (EHR) adoption project.
- Responsible for the rollout of the DOQ-IT project in California to over 300 small- to medium-sized practices and over 700 physicians.
- Responsible for recruitment of EHR vendors into the DOQ-IT project and served as principal point of contact to the EHR vendor community regarding the project.
- Responsible for the rollout of the Medicare Care Management Performance (MCMP) pay-for-performance demonstration project in California.
- Member of the Large State QIO Consortium (LSQC) health information technology advisory committee.

Senior Project Manager ALLSCRIPTS HEALTHCARE SOLUTIONS, Libertyville, Illinois May 2001 – January 2003

- Implemented an electronic medical record system at a Southern-California based, 100+ physician practice group.
- Managed the implementation of electronic dictation and document management systems at the University of Kentucky Chandler Medical Center.
- Managed the implementation of an electronic dictation system at a Sutter Medical Foundation, a Northern California based, 200+ physician healthcare organization.
- Served as a product specialist for company's dictation, document management, and imaging products.

Database Developer/Administrator(Independent Contractor) November 2000 – March 2001

- Assisted in the development of several database projects for Rush University Medical Center's physician practice management group, including the creation of a data warehouse and a client/server application for the processing of historical claims.
- Developed and implemented database administration procedures, including backup/recovery, maintenance, and security, for Rush University Medical Center's physician practice management organization.



Implementation Consultant/Project Manager SEQUEST TECHNOLOGIES, Lisle, Illinois December 1999 – October 2000

- Assisted clients with the development and implementation of customized electronic record systems using TIER® (Totally Integrated Electronic Record) software; integrated TIER® with RDBMS, including SQL Server and Oracle.
- Managed the development of an animal information management system for a world-renowned aquarium and designed the underlying database.
- Completed the implementation of a customized billing application, enabling a client to generate bills for over \$2 million in outstanding charges.
- Managed the development of a patient demographics-tracking application for use by behavioral health facilities in the state of New Jersey.
- Managed the redesign and development of a medical billing module for TIER[®].

Database Developer (Independent Contractor) August – December 1999

- Developed a water quality management database application for John G. Shedd Aquarium.
- Developed a project management application for Caremark Rx, Inc.
- Assisted United Healthcare of Illinois in the development of a provider receivables application.
- Assisted Arthur Andersen, LLP in the development of a real estate valuation application.

Regulatory Compliance Specialist, October 1998 – July 1999 Regulatory Compliance Auditor, June 1997 – October 1998 MEDPARTNERS, INC., Northbrook, Illinois

- Audited company businesses for compliance with federal and state laws and regulations and evaluated the effectiveness of internal policies, systems, and procedures.
- Developed database applications to capture and to analyze audit findings, to monitor ongoing audits, to track the status of corresponding corrective action plans, and to analyze the results of audit activities.
- Provided consultation and technical support in the resolution of regulatory compliance issues and the development of corrective action plans.
- Assisted in the development and implementation of a corporate-wide policy and procedure system.
- Oversaw various aspects of the regulatory compliance audit function and served as an audit team leader.

Outreach Services Specialist The University of Chicago Hospital Laboratory, Chicago, Illinois January – October 1996

 Oversaw the technical and operational aspects of testing at alternate-site laboratories.



- Developed and implemented quality control, quality assurance, and proficiency testing programs.
- Developed and implemented policies and procedures to improve the accuracy and efficiency of the Laboratories' specimen processing system.

Clinical Technologist, January, 1992 – December, 1995 Clinical Technician, June – December 1991

- Ensured compliance with policies and procedures required to meet the requirements of regulatory and accreditation agencies.
- Served as the coordinator of and a lecturer for the continuing education program.
- Assisted in the development, evaluation, and implementation of new laboratory methodologies and instrumentation.

Education

Bachelor of Arts, Chemistry, University of Chicago, Chicago, Illinois



Bonnie Noble, MA, RN, CPHQ

Director, Administrative Operations

Professional Experience

Director, Administrative Operations, Lumetra March 2003 – Present

- Oversees key operational functions including contract administration, quality management, and development of proposals to respond to new business opportunities.
- Develops staff to provide internal consultative services to advance the work of the company's lines of business.
- Manages and implements fiscal, administrative, and human resources.
- Leads the Operations Management Team and Master Planning Team to ensure efficient and effective working relationships across the company.
- Works closely with the Chief Operating Officer, Vice Presidents and Directors to incorporate appropriate models and strategies to enhance the effectiveness of the work.

Senior Project Manager, Home Health, Lumetra

- Lead project management activities for statewide healthcare quality improvement projects in the home health setting
- Guide and supervise multidisciplinary teams to design, implement and evaluate quality improvement projects
- Identify, plan, implement, and evaluate evidence-based quality improvement interventions
- Provide support to internal teams and external collaborators while monitoring the project budget, identifying variation, and recommending corrective action

Performance Improvement Manager Saddleback Coordinated Home Care Laguna Hills, CA August 2000 – 2003

- Overall responsibility for Performance Improvement Program
- OASIS and OBQI/OBQM Specialist
- JCAHO Preparation for Home Health, Private Duty & Hospice Divisions
- Program Development and oversight of clinical specialty programs
- Education and training: clinical, management, information technology
- Responsible for safety and infection control programs
- Development and oversight of employee orientation program
- Resource for all regulatory issues
- Monitor corporate compliance program
- Scope/size of agency: average daily census 600, monthly visits 5,000, RNs - 80, Rehab - 15 therapists



Independent Consultant

1999 - Present

- Performance Improvement program development & implementation
- Business process design
- Change Management
- Strategic planning and implementation for mergers and acquisitions
- JCAHO mock surveys and survey preparation

Administrator/Director Staffbuilders Lake Forest, CA 1999 – 2000

- Business development responsibility Referral sources: Physicians, SNFs, B&C facilities.
- Payors, Case Managers
- Responsible for overall agency operations
- Oversight of conversion to new Information System
- Oversight of agency Performance Improvement plan
- Oversight of orientation and ongoing education of agency staff
- Financial, business development and regulatory responsibility for agency
- Successful completion of JCAHO accreditation survey
- Patient population included Medicare intermittent care, Psychiatric Nursing, Extended Care and Infusion Services – 3000 visits per month

Administrator/Administrative Director CliniShare (TrinityCare) Cerritos, CA 1994 – 1999

- Overall responsibility for agency operations Intermittent Care, Infusion Nursing, Extended/Private Duty & Hospice including Clinical, Business/Financial and Regulatory Annual revenue +\$12 million
 Scope/size of agency: Started at 2200 visits/20,000 hours per month; increased to 4,500 visits/30,000 hours. After merger of three branches: 10,000 visits/month
- Experience with all major Managed Care payers including capitation and perdiem contracts
- Extensive experience with DHS and JCAHO surveys for both Home Care & Hospice
- Developed and implemented database for Case Management
- Designed and implemented health care delivery programs to address cost management in a Managed Care environment
- Developed and implemented a Clinical Competency program
- Oversight for implementation of OASIS regulations
- Extensive supervisory experience with responsibility for 200+ employees



Director of Patient Services Care At Home Los Alamitos, CA 1993 – 1994

- Overall responsibility for both intermittent and private duty services
- Managed Care contracting and business development

Home Care Manager/ Manager of Nursing Operations TOKOS Medical Corporation Santa Ana, CA 1987-1993

- Marketing and business development responsibilities
- Policy & Procedure development, Information Systems development, Nursing Forms & Supplies
- Interface with corporate Pharmacy Department to develop and implement Infusion program policies and standards

Education

- Degree in Nursing, Rancho Santiago College, 1981
- Bachelor's degree in business with concentration in the management of human resources, Excelsior College, 2002
- 2002 Excelsior College Bachelors Degree:
 - → Master's degree in organizational psychology, Alliant International University (formerly California School of Professional Psychology), 2005
- Currently Enrolled Alliant International University, PhD in prganizational Psychology

Certification

Certified Professional in Healthcare Quality: November 2001



Sandra Nunez, MPH

Healthcare Data Analysts III, Scientific Affairs

Professional Experience

Healthcare Data Analyst III, Scientific Affairs, Lumetra 04/2005 – Present

- Analyze Medicare administrative claims, data abstracted from medical records, survey, epidemiological and other relevant databases
- Interpret analytical results and present key information to the project team and other audiences
- Provide analytical support to provider teams regarding quality improvement collaboratives
- Collaborate with other project team members in the design of quality improvement initiatives
- Coordinate and manage internal data programs standardization project
- Develop standardized technical documentation for programming and healthcare summary reports
- Participate in new business initiatives regarding grant and manuscript development
- Present project related analysis results at national conference

Consultant

AOC Judicial Council, San Francisco, CA 05/2004 – 03/2005

- Design and draft evaluation study designs for a statewide Unified Family Court program.
- Desk book chapter will be published and disseminated throughout CA's 58 counties as a primary research resource guide.
- Conduct data analysis of domestic violence indicators, Equal Access Fund (EAF), and Litigant User surveys using SAS.

Consultant

Bellevue Hospital, New York, NY 11/2003 – 05/2004

- Design quality assurance study to evaluate health education materials.
- Develop study protocols, data collection instruments, and analysis plan; conduct preliminary data analysis; and draft interim report.
- Present methodology and preliminary outcomes to Quality Assurance Directors and staff.
- Write abstracts and coordinate session panel for the 2004 APHA annual conference.



Consultant

New York City Department of Health, New York, NY 01/2003 – 08/2003

- Managed contracts totaling over \$4 million, assessed progress of work, and ensured timeliness of deliverables for 32 community-based organizations (CBO).
- Developed an electronic-based monitoring system to track progress of work.
- Made fiscal management recommendations for FY '04 to reduce number of funded CBO's (from 32 to 26), proposed work performance measurement plans, and recommended methods to expedite contract registration and reimbursement process.

Research Consultant Columbia University & Commonwealth Fund, New York, NY 04/2002 – 12/2002

- Designed survey instrument, collected survey data, compiled and coded data into SPSS database, assisted in focus group interview guide development, and co-moderated focus groups.
- Evaluated the performance, success, and feasibility of expanding the HealthPass Program in NYC.

Consultant

Administrative Office of the Courts, San Francisco, CA 03/2001 – 09/2001

- Evaluated effectiveness of caregiver training program.
- Designed study, developed telephone interview, collected data, created database, drafted analysis plan, conducted questionnaire data analysis, wrote-up results.
- Designed focus group interview guides and co-moderated focus groups.
- Conducted and wrote literature review.
- Final report published and received national attention in dependency law.

Research Analyst Knowledge Network, MP, CA 09/2000 – 03/2001

- Managed survey data file process and program documentation using SAS, SPSS, and Oracle/SQL.
- Assisted in the design and maintenance of data warehouse (over 100,000 observations).
- Designed/implemented profile surveys using Net Quest Language.
- Conducted daily ad hoc statistical gueries for marketing staff.
- Completed weekly statistical reports on profile data and survey response rates.



Public Administration Analyst (Project Director) University of California, San Francisco, San Francisco, CA 12/1999 – 09/2000

- Managed all aspects of a program evaluation study, including budget, staff time, process evaluation, analysis of claims data, and data collection of semistructured interviews.
- Hired and trained research staff.
- Wrote proposal for nearly \$1M, which was funded by CSAT.
- Wrote and submitted abstracts for the 128th Annual Meeting of American Public Health Association (APHA) session panel, which was accepted.

Assistant Research Specialist II University of California at Berkeley, Berkeley, CA 12/1997 – 10/1999

- Managed research and development of two large epidemiological studies of bladder cancer.
- Developed and implemented all data collection methods, designed questionnaire, telephone scripts, interviewer training manual, database, data entry and quality and control procedures.
- Supervised and trained researcher staff.
- Co-authored \$1M grant and published meta-analysis manuscript

Research Analyst (previous Research Associate) TAG/The Lewin Group, San Francisco, CA 12/1994 – 09/1997

- Managed all aspects of multiple projects, such as budgets, interim reports, data analyses, final reports, and/or presentation of study results.
- Assisted in the design of economic models of mixed disease interventions, including decision analytic and spreadsheet models.
- Developed health-related questionnaires, such as quality-of-life, healthcare resource utilization and health utility surveys.
- Prepared and presented final study results to clients and internal staff.

Bilingual Interviewer Berkeley Survey Research Group, Berkeley, CA 10/1992 – 07/1994

- Conducted Spanish and English telephone interviews using a Computer-Assisted Telephone Interviewing (CATI) system.
- Assisted in debugging new questionnaires on the CATI system.
- Helped translate studies from English to Spanish, as well as back translations.



Education

- Master's degree in public health, health policy and management, Columbia University
- Dual Bachelor of Arts in psychology and sociology, University of California at Berkeley



REBECCA OLSON, PhD, MS

Senior Scientist

Professional Experience

Senior Scientist, Scientific Affairs, Lumetra 1997 – Present

- Designs, conducts, and evaluates healthcare quality improvement projects.
- Analyzes and interprets Medicare claims data and other databases to describe trends in healthcare services, assess medical outcomes, and identify specific risk factors for poor medical and health services outcomes.
- Provides training and support to analytic staff in the use of epidemiologic and statistical methods and in the interpretation of analytical findings. Presents analytic results in reports, publications, and scientific meetings.
- Serves as project manager for Lumetra's statewide diabetes quality improvement campaign.

Guidelines Committee Co-Chair Diabetes Coalition of California 2001 – 2003, 2003 – present

 Co-Chaired a statewide committee of volunteer healthcare and public health professionals responsible for reviewing, updating, disseminating, and implementing evidence-based basic guidelines for diabetes care on an annual basis.

Chair Diabetes Coalition of California 2003 – 2005

 Responsible for developing the agenda for all Coalition and Executive Committee meetings and overseeing the activities of the Coalition, an independent, not-for-profit organization working to improve the lives of people with diabetes in California.

Epidemiologist Diabetes Control Program, New Mexico Department of Health1996

 Responsible for diabetes surveillance, quantitative evaluation of diabetes management programs funded by the state, and developing and conducting epidemiologic studies.

Officer

Division of Epidemiology, Evaluation, and Planning; New Mexico Department of HealthCDC Epidemic Intelligence Service (EIS) 1994 – 1996

 Planned and conducted epidemiological investigations of disease outbreaks and other public health problems and communicated the results of these studies in written and oral reports. EIS is a two-year training program administered by the Centers for Disease Control and Prevention that provides on-the-job training in public health and applied epidemiology.



Epidemiologist Consultant UNICEF's Rwandan Emergency Operation 1994

 Consultant for 6 weeks: responsible for mortality and morbidity surveillance and nutritional surveys among unaccompanied refugee children.

Public Health Nutritionist Mennonite Central Committee 1986 – 1989

 Administered a feeding program for malnourished children and a food-forwork program for the families of malnourished children. Provided nutrition education for public health workers, nurses, and village women.

Education

- Doctor of Science, Nutritional Services, Cornell University, Ithaca, NY, 1994
- Master of Science, Nutritional Services, Cornell University, Ithaca, NY, 1986
- Bachelor of Science, Chemistry, Tabor College, Hillsboro, KS, 1983



ANA M. PEREZ, MSN, APRN, BC-ADM, CDE, CPHQ

Senior Project Manager

Professional Experience

Senior Project Manager, Lumetra 2002 – present

- Leads statewide project to improve diabetes care for Latinos Medicare beneficiaries and reduce health care disparities
- Evaluates summarized evidence from published literature, and other data sources to develop and implement techniques to improve healthcare
- Participates in radio, TV and speaker at state and national conferences to increase awareness about diabetes and cross-cultural care.
- Expert panel member in the statewide Lumetra diabetes collaborative for physicians offices
- Builds relationships with key organizations to improve diabetes care in California
- Develops low health literacy, culturally appropriate bilingual materials to empower patients/families and improve diabetes care

Latino Diabetes Program Supervisor, Diabetes Care Manager Health Education/Diabetes Clinic Kaiser Permanente, Oakland Medical Center 1992 – 2002

- Provides diabetes self-management education classes to Latino patients and families with diabetes (1999- present)
- Maintained communication with Primary Care Providers and organized team meetings when necessary to support patient needs and improve clinical outcomes.
- Organized first Spanish group appointment for Latino patients with diabetes in Kaiser Permanente.

Nurse Coordinator Genetics for the Northern California Kaiser Regional Spina Bifida Clinic 1997 – 1999

- Organized monthly multidisciplinary clinics for pediatric, adolescent and adults with Spina Bifida
- Track patients progress against goals and ensure referrals and activities were completed on schedule
- Provided clinical expertise for patients/families and provided support for patient's self-management goals



Home Health Nurse II, Case Manager Home Health Kaiser Permanente 1992 – 1997

- Lead internal multi-disciplinary team meetings. Facilitates communication between team members
- Participated in research study funded by Kaiser Regional to implement case management across the Northern California Region
- Mentored (clinical) graduated level nursing students

Clinical Nurse II. Intensive Care Nursery University of California San Francisco 1988 – 1992

- Mentored (clinical) nursing students
- Victorian Convalescent Hospital, San Francisco 1986-1988

Supervisor, Assistant Director of Nursing Civic Hospital, Lugano, Switzerland 1983 – 1985

Clinical Nurse II, Charge Nurse Civic Hospital, Lugano, Switzerland

Nephrology/ Hemodyalisis Unit

Education

- Master of Sciences in nursing, University of San Francisco
- Bachelor of Sciences in Nursing (BSN), Holy Names College, Oakland.
- Diploma of Nursing, University of Barcelona, Spain

Certifications

- Certified Professional in Healthcare Quality (CPHQ)
- Advance Practice RN, Board Certified, Advanced Diabetes Management (APRN, BC-ADM)
- Certified Diabetes Educator (CDE)
- Public Health Nurse, State of California. (PHN)
- Health Services Administration, Golden State University, San Francisco
- Intensive Care Nursery, University of California, San Francisco
- Hemodialysis, Lugarno, Switzerland
- Nurse Midwifery, University of Lausanne, Switzerland
- Surgical Emergencies, University of Barcelona, Spain
- Public Health, Nursing Board, Barcelona, Spain



Honors and Awards

- "Dean's List" University of San Francisco School of Nursing.
- "Sr. Eucharia Mitchell Award", Holy Names College, Oakland
- "Ruxton Scholarship", Holy Names College, Oakland
- "Minority Health Professions Education Foundation Grant", State of California
- "Certificate of Recognition of Outstanding Leadership and Nursing Abilities", Holy Names College, Oakland, California
- "Minority Nurse Education Fund", University of California, San Francisco.

Professional Activities

- Executive Committee, Diabetes Coalition of California
- Vice Chair Advocacy Committee, Diabetes Coalition of California
- Member Advisory Group Diabetes Initiative, CA Academy Family Physicians

Memberships

- California Association Healthcare Quality (CAHQ)
- American Association Diabetes Educators (AADE).
- Diabetes Coalition of California.
- Sigma Theta Tau International.
- National Association of Hispanic Nurses (NAHN)
- Kaiser Permanente Latino Association (KPLA)

Languages

Spanish, French, Italian, and Catalan.



Mary Ralston, PhD, MS

Senior Scientist

Professional Experience

Biostatistician/ Senior Scientist, Lumetra 2002 – 2004

- Lead biostatistician for the Home Health Quality Improvement and Hospital Quality Improvement projects, Doctor's Office Quality Pilot, and for the Hospital Payment Monitoring Program (HPMP) project
- Areas of expertise include study design, data analysis, and model development
- Data content expert on Fathom, the HPMP Oracle Express cube, home health quality measures, OBQI reports and the OASIS data set
- Provides biostatistical support including pattern analysis and study design for projects assessing frequency of DRG coding errors and necessity of services to improve accuracy of payment

Senior Statistician

Cancer Epidemiology Group Department of Epidemiology and Biostatistics, University of California, San Francisco 1995 – 2002

 Responsible for data analysis and data management strategies for ongoing longitudinal studies of risk factors and natural history of anal precancerous lesions and HPV infection in men and women

Statistical Consultant and Computer Systems Manager 1991 – 1994

- Responsible for computer studies in DNA Plant Technology
- Served as consultant to research scientists on statistical analysis of their data
- Provided statistical expertise in all phases of experiments (initial design, data collection, data analysis, interpretation of results) for a broad spectrum of applications including analysis of variance, regression, cluster analysis, and maximum likelihood estimation
- Interacted with a variety of researchers with varying levels of expertise in statistics
- Developed an understanding of experimental goals for projects in many scientific disciplines

Independent Consultant 1983 – 1991

 Consulting services in statistical analysis, computer programming and computer system management.



Senior Statistician BMDP Statistical Software, Los Angeles, CA 1982

• Evaluation of computer programs for statistical analysis

Temporary Assistant Professor Statistics Department, Iowa State University, Ames, IA 1979 – 1980

- Taught statistical computing
- Supervised master's thesis

Assistant Research Statistician, Lecturer Dept. of Biomathematics, University of California, Los Angeles 1975 – 1979

Developed computer programs for statistical analysis.

Education

- Doctor of Philosophy, Biostatistics, University of California, Los Angeles
- Master of Science, Biostatistics, University of California, Los Angeles
- Bachelor of Arts, Mathematics, Occidental College, Los Angeles, CA



Fabio Sabogal, PhD

Senior Healthcare Information Specialists, III

Professional Experience

Senior Healthcare Information Specialist III, Scientific Affairs, Lumetra 2004 – Present

- Responsible for synthesizing evidence-based information to develop interventions for the DOQ-IT program, as well as for the managed care, underserved, physician office, hospitals, and home health projects.
- Identifies best practices and evidence-based documentation.
- Designs behavioral interventions for the Medicare+Choice QISMC Breast Cancer Screening and Cultural Competence Projects, as well as the Diabetes in Latinos, Home Health, Physicians Offices, Colorectal Cancer Screening, and Mammography Campaigns for Lumetra. Worked on the Medicare Diabetes, Influenza Immunization and National Quality Assessment Performance Improvement (QAPI) Congestive Heart Failure Projects.
- Develops and executes healthcare intervention strategies using culturally appropriate communication mediums and materials. Translates and pretests bilingual materials in partnership with professional organizations, and writes reports and journal articles for scientific, medical, and lay publications.
- Writes literature reviews, abstracts briefs, articles, physician resources, and patient educational materials. Serves as spokesperson for the nursing home, home health, and hospital compare initiatives using Spanish media, and works with ethnic media. Conducts research and helps in the process of grant writing.
- Supports coalition building with health and community organizations and makes community, media, and scientific presentations.

Senior Healthcare Information Specialist, Scientific Affairs, Lumetra 2002 – 2004

 Responsible for identifying best practices and evidence-based documentation for all Lumetra quality improvement projects, including cultural competency, physician office, managed care, home health, nursing homes, and hospitals.

Intervention Specialist, Communications and Marketing, Lumetra 1998 – 2002

- Provided communications support for the mammography, diabetes, adult immunization, physician office, Medicare rights, and hospital quality improvement initiatives.
- Developed and executed healthcare intervention strategies using culturally appropriate mediums and channels.
- Managed assigned marketing and communications components of outreach activities directed at providers, the healthcare community, and consumers,



- including concept and strategy development, planning, testing, design, production, dissemination, and evaluation.
- Conducted research related to projects, including needs assessment, literature review, focus groups and interviews.

Senior Data Analyst, Lumetra 1997 – 1998

- Provided research and analytic support, consultation, and review for a variety of projects, programs, and all departments.
- Performed data analysis and interpretation using appropriate methodology.
- Collaborated in the design and evaluation of projects and healthcare quality improvement initiatives by application of the principles of biostatistics, epidemiology, and related social sciences.
- Provided review and methodological support of analysis plans.
- Provided analytical and epidemiological expertise in the development and implementation of evaluation plans.

Associate Professor of Medicine

Division of General Internal Medicine, Medical Effectiveness Research Center on Diverse Populations, Center for AIDS Prevention Studies, Department of Medicine, University of California, San Francisco 1995 – 1997

- Data analysis and manuscript development for the largest database on Family of AIDS Behavioral National Survey.
- Concept development, survey design, data collection and analysis, and manuscript writing of multiple projects, including the Medical Effectiveness Research Center for Diverse Population, San Francisco Diabetes Family Study, and the National Network for Hispanic Cancer Prevention.

Associate Research Psychologist

Division of General Internal Medicine, Medical Effectiveness Research Center on Diverse Populations, Center for AIDS Prevention Studies, Department of Medicine, University of California, San Francisco 1990 – 1995

 Worked with Professor Joe Catania on several research projects related to risk behavior for HIV in minority communities.

Assistant Research Psychologist

Division of General Internal Medicine, Department of Medicine, University of California San Francisco School of Medicine 1985 – 1989

 Collaborated with Professors Robert Hiatt and Eliseo Perez-Stable on many projects funded by the National Cancer Institute that related to cancer screening on underserved populations.



Research Specialist, Department of Psychology University of California San Francisco School of Medicine 1985 – 1989

Research Specialist
Division of General Internal Medicine, University of California San
Francisco School of Medicine
1984 – 1985

 Collaborated with Professor Eliseo Perez-Stable as a project manager of the Hispanic Smoking Cessation Research Project funded by the National Cancer Institute.

Assistant Research Psychologist Research Specialist Department of Psychology, University of North Texas, Denton, TX 1984 – 1985

 Worked with Professor Bert Hayslip developing psychometric testing for adult development and aging.

Education

- Doctor of Philosophy in psychology, University of North Texas, Denton, TX
- Master of Arts in educational measurement, evaluation and research, Universidad del Valle, Guatemala City, Guatemala
- Bachelor of Arts in psychology, Bogotá, Colombia



Linda M. Sawyer, PhD, APRN, BC Chief Operating Officer

Professional Experience

Chief Operating Officer, Lumetra 2002 – 2004

- Provides primary leadership for Lumetra's day-to-day operations, including the Quality Improvement Organization (QIO) contract and special studies with the Centers for Medicare & Medicaid Services (CMS).
- Responsible for assuring that all operations and the organization's business units have the appropriate structure and resources to carry out all functions efficiently and effectively. Responsible for achieving documented results, passing contract evaluations, and exceeding customer satisfaction.
- Responsible for organizational and strategic planning within Lumetra.

Additional Experience

- Director of Managed Care & Program Development at Lumetra (then CMRI), 2000–2002.
- Project Lead for Lumenta's Medicare+Choice (now Medicare Advantage)
 Quality Review Organization (M+CQRO) contract with CMS.
- National expert in developing CMS's 6th Scope of Work Task 3: Quality Improvement System for Managed Care and conducting successful collaborative quality assessment performance improvement (QAPI) with health plans.
- Provided technical assistance to health plans for QAPI projects
- Experienced trainer: Designed and facilitated national training sessions for M+CQRO project and developed curriculum for graduate level nursing courses
- Expert meeting facilitator: Board President of state nursing organization, multiple Board of Director positions on national level, Chair or facilitator of multiple committees.
- Designed and managed research projects.
- Published academic chapter in textbook on Community Health Nursing and manuscripts in numerous peer review journals.
- Organized numerous conferences in managed care and in nursing, including serving as the Program Chair, 2000 International Congress on Women's Health Issues
- Previous positions include Assistant Clinical Professor, University of California San Francisco School of Nursing (1997 – 1999) and Coordinator of Quality Assurance & Staff Development, Kaiser Home Health Agency (1993 – 1997)
- Chaired the Strategic Planning Committee of the American Nurses Credentialing Center Board of Directors and the American Nurses Association Advisory Group for Community Nursing Quality Indicator Development



International and local consultant on quality improvement, home health, health professional codes of ethics, community health nursing, cultural competence and grounded theory

Credentials

- PhD, APRN, BC Advanced Practice Registered Nurse, Board Certified as a Clinical Specialist in Home Health Nursing, American Nurses Credentialing Center, 1996 – present
- Board Certified Community Health Nurse, American Nurses Credentialing Center, 1984 – present
- Public Health Nurse, 1980 present
- Registered Nurse, California, 1974 present
- Clinical Nurse Specialist, California, 1998 present
- Registered Nurse, Massachusetts, 1970 present (currently inactive status)

Education

- PhD, University of California, San Francisco School of Nursing, 1996
- Master of Science Degree in Nursing, University of California, San Francisco, 1988
- Bachelor of Science Degree in Nursing, University of San Francisco, 1980
- Diploma in Nursing, Children's Hospital School of Nursing, Boston, 1970

Honors

- Doctoral Student Address, Graduation Ceremony, University of California, San Francisco, School of Nursing, 1996
- UCSF Alumni Scholarship, University of California, San Francisco, School of Nursing Alumni Association 1996
- Government Relations Award, Alameda County Nurses Association, 1992
- Salud y Paz Award, National Central American Health Rights Network, 1990
- Francis Milletich Award, Alameda County Nurses Association, 1988
- Sigma Theta Tau International Nursing Honor Society, inducted 1988
- Outstanding Master of Science Award, University of California, San Francisco, School of Nursing, 1988
- Shirley Titus Scholarship, California Nurses Association, 1987
- Alameda County Nurses Association Scholarship, 1986, 1987, 1991, 1993
- Joseph T. McMann Memorial Scholarship Award, 1967
- National Honor Society, 1963-1967



Recent Presentations & Publications

- Sabogal, F., Andrulis, D., Tantaros, M. and Sawyer, L. Managed Care Cultural Competence Self-Assessment Protocol: A Model To Evaluate Linguistically And Culturally Appropriate Services. Under Review; Sawyer, LM et al. (2002).
- Expanding American Nurses Association Nursing Quality Indicators to Community-based Practice. Outcomes Management, 5(2); Sawyer, LM. (1999).
- Engaged Mothering: The Transition to Motherhood for a Group of African American Women. Journal of Transcultural Nursing,1, 14-21; Nelson, M, Proctor, S, Regev, H, Barnes, D, Sawyer, L, Messias, D, Yoder, L, & Meleis, AI. (1996).
- International Population and Development: The United Nations' Cairo Action Plan for Women's Health. Image: Journal of Nursing Scholarship, 28,75-80; Sawyer, L, Regev, H, Proctor, S, Nelson, M, Messias, D, Barnes, D & Meleis, AI. (1995).
- Matching vs. Cultural Competence in Research: Methodological Considerations. Research in Nursing and Health, 18, 557-567; Sawyer, LM. (1995).
- Community Participation: Lip Service? Nursing Outlook, 43,17-22; Barnes, D, Eribes, C, Juarbe, T, Nelson, M, Proctor, S, Sawyer, L, Shaul, M, & Meleis, AI. (1995).
- Primary Health Care and Primary Care: A Confusion of Philosophies. Nursing Outlook, 43, 7-16; Sawyer, LM. (1993).
- The Nurse's Role in health Care Reform. Visions,2(1), 16; Sawyer, LM. (1990).
- Health and Human Rights: Can Nurses Work for One and Not the Other?
 California Nurse, 86(3), 8-10; Sawyer, LM. (1989). Nursing Codes of Ethics:
 An International Comparison. International Nursing Review, 36(5), 145-148.



Laura Stewart, RN, MPA/HSA, CPHQ

Project Manager

Professional Experience

Lumetra

Project Manager - Medicare Advantage Quality Review Organization (MAQRO) 11/2004 - Present

Quality Improvement Advisor, 4/2004 – 10/2004 Collaborative Director, 11/2003 – 3/2004

- Manage the special study CMS project, MAQRO, which is funded to assist CMS in the review, evaluation and scoring of the Quality Improvement Projects (QAPI) required of Medicare Advantage Organizations. Manage administrative reporting and budget of the project. Conduct reviews and evaluations of the QAPI projects submitted from health plans.
- Provide technical assistance related to quality improvement projects to Medicare Advantage plans and Quality Improvement Organizations.
- Apply knowledge of Institute for Healthcare Improvement (IHI) collaborative model to the physician office setting: key role in developing collaborative charter, change package and preparatory materials for both the Diabetes Care Collaborative and the DOQ-IT Practice Performance Improvement Initiative.
- Coach physician office teams in the Diabetes Care Collaborative on process improvement and provide consultative services to assigned participant teams.
- Participate in team development of provider outreach materials to increase rates for Diabetes preventive care, adult immunization and mammography.

Senior Provider Relations Representative North American Medical Management (NAMM California)

- Independently, developed and managed relationships with health plans, and with physicians, facilities and ancillary providers in the East Bay provider network. In the East Bay, NAMM managed two IPAs and was delegated by two Health plans to provide medical management and claims processing for their Medicare Plus Choice members.
- Educated physicians, medical office staff, and ancillary providers on administrative policies, and referral and authorization guidelines.
- Informed and educated offices regarding Health plan and governmental regulation updates, especially as pertained to CMS (Medicare), HIPPA, the DOFR (Division of Financial Responsibility), and benefit changes.
- Resolved escalated Provider issues. Reported to monthly Board, UM and QA meetings.
- Analyzed claims and appeals for special projects initiated to resolve disputes between provider and medical group.
- Initiated and chaired monthly teleconference with statewide claims, appeals, and IS configuration departments to address ongoing provider concerns.



- Successful in facilitating communication and constructing and implementing action plans.
- Managed contracting process for participating providers from initiation of the contract to the full execution.

NAMM California Northern California Supervisor, Disease Management Program 11/2001 – 6/2002

- Managed own caseload and supervised Northern California staff in statewide disease management program, CARE Connections. Oversight of three locations: Emeryville, Santa Rosa and Modesto.
- Telephonic assessments of patients with Congestive Heart Failure. Reduced hospitalizations through patient and family education, and clinical interventions.
- Managed rollout of CARE Connection's program to Modesto market. Unique requirements of this market required tailoring the program in collaboration with the disease management programs of the local hospital.
- Hired and trained non-licensed staff to enhance RN caseload capabilities and maintain program budget.

Clinical Instructor II Alameda County Medical Center (ACMC), Oakland, CA 1/2000 – 8/2001

- Participated in the design and implementation of a nursing strategic objectives at Alameda County Medical Center, comprising an acute-care hospital, a SNF and rehabilitation facility, an in-patient psychiatric facility, and numerous ambulatory care clinics.
- Approximately 50% of focus was on the Med-Surgical units; the remaining 50% involved orientation, teaching and advising staff throughout the Medical Center. Worked closely with the QI department and had a key role in implementing an action plan to succeed in JCAHO and DHS surveys.
- Developed clinical education programs for medical-surgical nurses. CPR Instructor.
- Clinical resource for medical-surgical procedures and patient care planning.
- Developed and conducted health education classes for non-licensed personnel.
- Coordinated the monthly orientation program for newly hired employees in ACMC nursing units and clinics.
- Assisted with project management for implementing a new acuity system throughout the Medical Center.
- Educated and evaluated staff in required areas of proficiency including Cal-OSHA mandated topics (safety, hazardous waste, disaster preparedness, infection control).
- Designed instructional program on medical record documentation that was used throughout the Medical Center (both ambulatory and in-patient units); resulted in substantial improvement in meeting JCAHO accreditation standards.



- Performed chart audits and analyzed data to assess compliance with policies and regulatory requirements.
- Developed guidelines for auditing performance indicators resulting in improved reliability of data collected by QI department.
- Proficient in Web-based literature searches; utilized research on evidencebased practices to support managerial decisions in revising policies and procedures; disseminated information about best practices.
- Member of interdisciplinary pain management committee. Led task force to improve pain management education. Developed resource binder for client education.

Kaiser Permanente Medical Center, San Francisco, CA 1985 – 1999 Assistant Manager, Critical Care (1999) Administrative House Supervisor (1997-1998) Charge Nurse, ICU/CCU (1993-1996) Staff Nurse, ICU/CCU (1985-1992)

Education

- Master of Public Administration/Health Services Administration: Univ. of San Francisco (1999)
- Bachelor of Arts Cum Laude: California State University, San Francisco (1989)
- Associate of Science in Nursing: University of Vermont, Burlington, VT (1973)

Professional Licensure and Certification

- California RN license 286392
- Certified Professional in Healthcare Quality (CPHQ)



Merry Tantaros, MA, RN, CPHQ Senior Project Manager

Professional Experience

Senior Project Manager, Lumetra 2/1999 – Present

- Daily management of multiple national Quality Improvement projects for managed care organizations in the state of California.
- Responsibilities include providing technical assistance to the health plans on project design, development of measure, implementing interventions, analyzing results and assisting with periodic project reports to CMS.
- Current projects include Diabetes, Breast Cancer Screening, increasing access to Cultural and Linguistically Appropriate Services and decreasing Clinical Health Care Disparities among ethnic groups, and Congestive Heart Failure.

Managed Care & National Lead for Medicare Advantage Quality Improvement Organization (QIO) Service Center, Lumetra

- As National Lead for MAQIOSC, provides leadership at a national level to other Quality Improvement Organizations and the health plans in their states who have Medicare Advantage populations.
- Responsibilities include hosting educational events in person, via Webex, telecon, etc.; maintenance of an active listserv to address daily issues related to managed care and or regulatory matters, and to act as a national clearinghouse for information related to best practices, organizational culture, implementing rapid-cycle quality improvement and to develop tools to assist the QIOs in their work
- Responsible for managed Care budget is \$2.5M over the 36 months of our contract; the QIOSC budget is funded at \$500K for 24 months.

Project Lead, Medicare Beneficiary Alternative Complaint Pilot 09/1997 – 09/1998

- Contracted by California's designated Peer Review Organization to re-design the data collection system and medical review process for Medicare beneficiary complaints for HCFA Pilot Project.
- Designed and implemented a system that combines the principles of case management with "pro-active pending", achieving a 25-40 percent reduction in complaint-to-resolution time.
- Developed work-flow processes, procedural guidelines, interview scripts, all relevant tracking forms and a triage system to "fast track" urgent quality of care concerns.

Director of Medical Management North American Medical Management, Emeryville CA 09/1998 – 02/1999

 Operational oversight and regulatory compliance for Utilization Management, Case Management, Provider Relations, Member Services, DME, Patient Education for commercial and Medicare populations.



Senior Clinical Management Specialist Pacificare of California, San Francisco, CA 01/1996 – 06/1998

- As Senior Clinical Management Specialist for fifth largest HMO in the country, directed the integration of FHP Quality Management department into PacifiCare systems following the corporate merger.
- Responsibilities include design of transitional workflow systems and cross training of staff. Achieved complete regulatory compliance within 3 months.
 Performed all aspects of QM activities including appeals and grievances, medical record audits, peer review, and NCQA audit preparation.
- Featured speaker for provider education series, "Quality Networking", "Doing It Right the First Time", "Legal and Regulatory Compliance". Keynote speaker for the IPA Association of California's workshop, "Re-designing Member Services".

Quality Management Specialist Hill Physician Medical Group, San Ramon, CA 1994 – 1996

- Performed all QM activities including appeals and grievances resolution, peer review, on site and medical record audits, internal investigations, risk management, and physician credentialing.
- Developed and implemented data collection and review activities related to the Pacific Business Group on Health Outcomes Studies.

QM Auditor Managed Care Resources, Los Angeles, CA 1994

• QM Auditor contracted through this firm to perform medical chart reviews, and site visits in preparation for Aetna's first NCQA accreditation.

Home Health Plus, San Leandro, CA 1990 – 1993

- Intake Liaison Nurse/Community Liaison for this full service home health/home infusion agency with volume of 5400 visits per month in Alameda and Contra Costa counties.
- Developed performance standards for pilot project of Intake Liaison nurse, which included pre-service evaluation of clients for referral to appropriate clinical services, and contract negotiations with third party payers. The success of this position resulted in national implementation.
- As Community Liaison, achieved 300% increase in home health referrals for Medicare visits and private duty services in assigned territory. Responsible for provider education related to changes in Medicare regulations; and, for community outreach and education programs for seniors.

Healthcare Consultant 1986 – 1990

 Subcontractor specializing in turn-key operations for high volume Emergency Departments throughout Illinois, California, Texas, and New York.



- Responsible for physician recruitment, staffing, and credentialing; design and implementation of compensation programs; oversight of billing procedures and coding; provider education for billing, coding, and regulatory compliance.
- Clients included Fischer-Mangold Emergency Physicians Group, EmCare, Summit Health Plan, Medicus Medical Group.

Education

- Master of Arts, Organizational Management: University of Phoenix On-Line
- Bachelor of Science, Nursing: University of Phoenix
 - → Certificate, Health Care Marketing: University of Phoenix
 - → Associate of Science, Nursing: Community College of Philadelphia
 - → Institute of Healthcare Improvement "Breakthrough" College

Credentials

- Registered Nurse, California
- Public Health Nurse, California
- Certified Professional in Healthcare Quality



3. Lumetra Capabilities and Past Experience

<u>Lumetra's current and</u> <u>past customers include:</u>

- Actuarial Research Corporation
- California HealthCare Foundation
- CGI-AMS, Inc.
- Pacific Business Group on Health
- State of California
- U.S. Department of Justice

Lumetra provides dynamic services and solutions for government, employers, healthcare payors, healthcare providers, and other entities. Our work for the Centers for Medicare & Medicaid Services, the Pacific Business Group on Health, the Unites States Department of Justice, the California HealthCare Foundation, and Bearing Point (formerly KPMG) best demonstrates the skills and capabilities the State of Arizona requires in its Medical Management Consulting Request for Proposal.

As the federally designated Medicare Quality Improvement Organization (QIO) for California, from November 1, 2002 to October 31, 2005 Lumetra was contracted by the Centers for Medicare & Medicaid Services (CMS) to work with physicians, hospitals, home health agencies, nursing homes, consumers, healthcare stakeholders, and state agencies to refine the delivery of healthcare services in California. Lumetra's efforts were directed to improve the quality, safety, and integrity of healthcare to ensure that patients get the right care at the right time, particularly among underserved populations. Known as the 7th Scope of Work (SOW) within CMS and the QIO community, Lumetra's three-year effort encompassed a California-specific core contract plus several national Special Study contracts.



In addition to the core Quality Improvement Organization (QIO) contract, in the summer of 2002 CMS awarded Lumetra the Medicare Beneficiary Protection Quality Improvement Organization Support Center (MBP QIOSC) contract. Under this contract expansion, Lumetra's MBP QIOSC team of experts provides technical assistance and training to all Quality Improvement Organizations (QIOs) on case management, ongoing internal quality control approaches, mediation, and other Medicare beneficiary protection activities.



In 2003, Lumetra was awarded a contract to serve as the Medicare Advantage Quality Improvement Organization Support Center (MA QIOSC). Under the contract, Lumetra provides technical assistance to QIOs in those states where Medicare Advantage health plans were available to beneficiaries. The services and solutions provided by Lumetra to QIOs throughout the nation included developing methodologies to assist managed care organizations with the design and implementation of effective quality improvement projects, as well as providing training and resource sessions fostering the development and utilization of best practices in quality improvement.



Since 1999 and through October 2005, Lumetra has won designation as the Medicare Advantage Quality Review Organization (MAQRO) for 17 western states and New York. As one of three MAQROs in the nation, Lumetra provides evaluation and consultation expertise to health plans and assesses the quality and outcomes of the Quality Assessment Performance Improvement (QAPI) projects.



Under an additional Special Study contract with CMS called Doctor's Office Quality (DOQ), Lumetra worked to develop a model for measurement and improvement of quality of care for chronic disease and preventive services at the level of individual physician and medical offices.



And finally, also in 2003, Lumetra was selected lead QIO for the Doctor's Office Quality - Information Technology (DOQ-IT) Project. This two-year Special Study was designed to improve quality of care, patient safety, and efficiency by promoting the adoption of Electronic Health Records (EHR) and Information Technology (IT) in primary care physician offices.

To successfully fulfill the contract's collective requirements and performance goals, Lumetra staff has developed and continues to deliver specialized and effective consulting solutions which directly testify to Lumetra's experience in the eight service areas we are offering the State of Arizona in response to its Medical Management Consulting Request for Proposal.

Lumetra's Offers Expert Consultants to the State of Arizona in the Following Areas:

- Program Review & Evaluation
- Program Consultation
- Case File Review
- Statistician
- Management Consultant Healthcare Practice Emphasis
- Management Consultant Strategic Planning Emphasis
- Management Consultant Medical Management Emphasis
- Management Consultant Healthcare Research Emphasis

3.1 PROGRAM REVIEW AND EVALUATION

While successfully fulfilling the requirements and performance goals of the Centers for Medicare & Medicaid Services (CMS) quality improvement program 7th Scope of Work (SOW) and the associated Special Study contracts, Lumetra's staff developed and delivered focused, high-value consulting solutions in all of the **Program Review and Evaluation** service areas sought by the State of Arizona in the Medical Management Consulting Request for Proposal.

- Review operations to determine compliance with applicable federal, state, and contractual requirements
- Provide technical assistance with the development of program evaluation plans
- Review Health Programs Service Delivery Systems and Methodologies



- Analyze and evaluate project service quality, performance, conformance with contract requirements, outcomes and impact of projects on the communities
- Document findings and recommendations, including proposed corrective action plans
- Prepare, implement and analyze program and client surveys, conduct site-visits and reviews
- Prepares reports, and make recommendations

Compliance Experience

- Federal
- California
- Colorado
- Connecticut
- New York
- Texas

A core requirement of Lumetra's contracts with CMS is operational compliance with all applicable federal, state, and contractual requirements. Lumetra's executive and administrative staff has a 20-plus year history of constructing and managing effective compliance plans operations in California and other states. Lumetra, as California's Quality Improvement Organization (QIO) for Medicare, is entrusted with confidential information and data that may be used or disclosed only as authorized by federal statute, regulations, contract clauses, and good business practices. All employees, officers, and directors of Lumetra are fully committed to ensuring the confidentiality of this information. Moreover, as an organization with URAC provisional accreditation as an Independent Review Organization (IRO), Lumetra assures agencies of the State of Arizona that it will perform its services free from conflicts of interest. Additionally, in support of Lumetra's independent review work and contracts outside of California, we have thoroughly researched and evaluated compliance in multiple states.

Lumetra's scientific and analytic staff has delivered specialized data analysis and measurement as well as health information solutions and services meeting the organization's needs to fulfill its contract requirements as California's designated QIO for Medicare. Lumetra staff provided technical assistance to California's managed care organizations with sampling, methodology, and the development of program evaluation plans for their federally required Quality Assessment and Performance Improvement (QAPI) projects.

While supporting Lumetra's hospital initiatives, Lumetra developed and conducted Institute for Healthcare Improvement model "Collaboratives" and statewide workshops that taught hospital clinical and administrative staff system change as the means to quality improvement (QI). In the course of delivering these programs, Lumetra's consultants led an analysis, evaluation, and measurement of clinical service quality and performance with clinical best practice outcomes and performance-level impact on the communities the participating hospitals serve.

As a national leader with more than 20 years of experience in utilization review, quality of care concerns, patient appeals, and coding, Lumetra conducts a wide range of review activities to improve quality of care. Our staff is equipped with cutting-edge techniques to document findings and



recommendations and regularly utilize Quality Improvement Plans (QIPs) as an important tool for achieving quality improvement in case review. Previously called corrective action plans, Lumetra uses QIPs for evaluation and monitoring, root cause analysis, and the use of "Plan Do Study Act" cycles to achieve systems improvement.

In our Heart Failure (HF), Surgical Infection Prevention (SIP), Pneumonia (PNE), and Acute Myocardial Infarction (AMI) Collaboratives, Lumetra cultivated expert panels to prepare, review and synthesize the relevant literature to identify and prioritize an expansive collection of HF, SIP, PNE and AMI quality improvement interventions that would be most effective in moving quality measures in a pilot population of hospitals. Our staff and expert panels reviewed and evaluated the most successful quality improvement interventions employed by participating hospitals for use by all hospitals in California through statewide training workshops and onsite visits.

3.2 PROGRAM CONSULTATION

Lumetra utilizes:

- Improvement plans that achieve measurable results
- Evidence-based guidelines and interventions
- Rigorous statistical methods and project design
- Effective system-level interventions

Working for the Centers for Medicare & Medicaid Services (CMS), Lumetra's staff developed and delivered focused, high-value consulting solutions in all of the **Program Consultation** service areas sought by the State of Arizona in the Medical Management Consulting Request for Proposal.

- Analysis of utilization, needs assessments, and data
- Perform financial and cost analysis
- Performance incentives
- Cost projections for projects using best practices
- Implementation strategies for best practices
- Work force improvement strategies
- Technological solutions
- Apply other systems/models/innovations

Supporting Lumetra's efforts and contract as the Medicare Quality Improvement Organization (QIO) for California, the organization's scientific and analytic staff linked a variety of data sources to generate quality improvement feedback reports, developed methodology, and conducted needs assessments and ongoing performance monitoring utilizing statistics, analysis, and graphics to guide healthcare quality improvement activities.

As the national lead QIO for the Doctors Office Quality-Information Technology (DOQ-IT) project, Lumetra developed a "Business Case", including cost-benefit analysis and the utilization of clinical best practices



for the adoption of information technology in healthcare settings. In addition, Lumetra staff consulted with CMS on how the DOQ-IT performance measures are to be incorporated into the CMS "Pay-for-Performance" primary care incentive demonstration project.

In 2003, more than 100 nursing home staff participated in Lumetra's "Creating a Culture of Excellence" workshops, in which Lumetra experts provided insight on recruitment and retention strategies for long-term care, teamwork and team building, and empowerment through effective communication strategies, and successful leadership strategies. Lumetra successfully helped nursing home participants learn how to create a "culture of excellence" that positively impacts workforce retention.

Lumetra routinely teaches and facilitates systems improvement in all healthcare settings. Working with the large and diverse population of healthcare providers, we have developed and tested methodologies related to engaging senior leadership in organizational change. These and other Lumetra programs incorporate the principles of rapid-cycle quality improvement plan-do-study-act (PDSA) cycles, and small tests of change. Lumetra is eager to develop similar intervention packages to assist Arizona's healthcare leadership in the innovation and integration of processes and systems aimed at improving patient care.

3.3 CASE FILE REVIEW

As contractors to Bering Point, CMS, the State of Colorado, and the U.S. Department of Justice; Lumetra's staff have provided the **Case File Review** service areas sought by the State of Arizona in the Medical Management Consulting Request for Proposal.

- Design Independent Quality Evaluation (IQE)
- Review tools and processes
- Coordinate logistics
- Consultation to DES' Rehabilitation Services Administration
- Conduct on-site review activities
- Prepare reports
- Review medical records
- Review and perform data entry
- Submit case file review results

With 20 years of medical review experience, Lumetra's staff and panel reviewers are trained and certified to perform accurate and reliable medical reviews and associated reports. Lumetra has a highly skilled analytical staff with expertise in research methodology, metric development, data analysis, biostatistics, survey design, evaluation



planning, and report and manuscript writing. Since the start of our 7th SOW contract with CMS, Lumetra has successfully responded to and/or processed more than 25,000 case reviews including Medicare beneficiary quality of care complaints, discharge appeals, notices of non-coverage, and other CMS-contracted activities. All of these case reviews included appropriate logistical coordination and data review, entry, aggregating, and reporting. Lumetra's efforts also included developing, training, implementing, analyzing, and reporting a national inter-rater reliability protocol for case review. Furthermore, Lumetra's staff have developed internal quality control (IQC) processes and designed data displays that allow monitoring to internally report activities for both national and statewide initiatives.

In our work with Bearing Point (formerly KPMG Consulting), Lumetra staff successfully conducted on-site documentation, review, and testing of the internal controls used by three commercial, cost-based managed care organizations in New York and Florida. Lumetra's efforts were focused on insuring that their medical review policies were promptly and correctly implemented, gathering baseline medical review data, and verifying that the cost and workload associated with their medical review activities were accurately and completely captured.

Recognized for our expertise in physician review for appropriate, medically necessary care, Lumetra has been contacted by the Office of the Inspector General (OIG) of the U.S. Department of Justice (DOJ) ten times to perform physician review in the past two years. Lumetra recently conducted physician reviews of physician office records for 23 patients for a particular physician. Charts were reviewed to determine if the patients received surgical nasal endoscopies (billed) that were medically necessary. Additionally, a high number of allergy and breathing tests needed a review for necessity.

Lumetra has more than 325 board-certified physicians in many specialties. The DOJ usually asks that these physicians be willing to testify in court. Additionally, the DOJ requests that the code review and physicians review panels include the expertise of professional, non-physician, and physician-certified experts.



Moreover, as previously stated, Lumetra has submitted its application for accreditation by URAC as an Independent Review Organization (IRO). In June 2005, Lumetra passed URAC's accreditation desktop audit with a recommendation that URAC's Accreditation Committee grant Lumetra provisional accreditation as an IRO. Lumetra received provisional accreditation in August 2005 and anticipates receiving full accreditation status by the end of 2005.

Accreditation as an IRO assures that Lumetra performs its case review services free from conflicts of interest, establishes appropriate



qualifications for reviewers, addresses medical necessity and experimental treatment issues, and has reasonable time periods for standard and expedited reviews and appeals processes. An organization with URAC accreditation strives for a fair and impartial review process that is of benefit to both patients and physicians, including Arizona's Department of Economic Security Rehabilitation Services Administration in its work to assist individuals with disabilities achieve increased independence and employment.

Lumetra's proposal offers Arizona a team of top professionals with extensive experience interviewing case managers, families, providers, and others. Our reviewers are either physicians, master's degree-prepared public or behavioral health professionals with at least three years of clinical experience, or registered nurses with a minimum of three years of public or behavioral health nursing experience.

3.4 STATISTICIAN

In partnership contracts with the Pacific Business Group on Health and the Centers for Medicare & Medicaid Services (CMS), Lumetra's staff developed and delivered focused, high-value consulting solutions in all of the **Statistical** service areas sought by the State of Arizona in the Medical Management Consulting Request for Proposal.

- Review case files
- Sampling framework
- Collect program related data
- Data collection methods
- Statistical techniques
- Prepare reports

In the 7th SOW, Lumetra worked with hospitals across the state to identify and reduce the error in payment for unnecessary one-day hospital stays. The focus was on high-volume/high-error facilities, with the goal of reducing the overall state payment error rate due to the prevention of unnecessary one-day stays. Lumetra's analytical capabilities were applied to all aspects of this contract and include proficiency in developing, training, implementing, analyzing, and reporting a national inter-rater reliability (IRR) protocol for case review.

Lumetra's analytical staff offers expertise in the following additional areas:

- Linking of databases to generate quality improvement feedback reports
- Securely downloading data and generating regular reports



- Conducting performance monitoring utilizing statistics, analysis, and graphics
- Statistically exploring Health Plan Employer Data and Information Set (HEDIS), Health Outcomes Survey (HOS), and Consumer Assessment of Health Plans Survey (CAHPS) to assist managed care organizations with their national Quality Assurance Performance Improvement (QAPI) projects
- Applying biostatistical approaches to process and outcome evaluation, conducting sample size determination and random sampling
- Linking state cancer registry data to Medicare data, analyzing breast cancer cases, and providing information for the breast cancer quality improvement projects
- Developing, implementing, analyzing, and reporting on quality improvement interventions, processes, and outcomes
- Developing, training, implementing, analyzing, and reporting a national inter-rater reliability (IRR) protocol for case reviews, including sampling frame and data collection.

In work for the Pacific Business Group on Health (PBGH), Lumetra staff processed healthcare claims data through efficiency analysis software, validated the data for accuracy, and performed concatenation of data files to enable processing of one combined data file. In addition, Lumetra staff performed technical mapping of the data, formatted native data values to the format required by the analysis software, and prepared reports.

3.5 HEALTHCARE PRACTICE

While successfully fulfilling the requirements and performance goals of the Centers for Medicare & Medicaid Services (CMS) quality improvement program 7th Scope of Work (SOW) and the associated Special Study contracts, Lumetra's staff developed and delivered focused, high-value consulting solutions in all of the **Healthcare Practice** service areas sought by the State of Arizona in the Medical Management Consulting Request for Proposal.

- Evaluation of program performance
- Surveys
- Development of performance measures

As one of three contractors involved in the Doctor's Office Quality (DOQ) Special Study contract, Lumetra's staff worked on the development of chronic condition quality measures prevalent in primary care for physician offices throughout the nation. The project designed, developed, and



tested a comprehensive, integrated approach to measuring the quality of care for chronic disease and preventive services

The resulting quality measurement set contained three components:

- Clinical Performance Measures:
 - → Coronary Artery Disease
 - → Diabetes Mellitus
 - → Heart Failure
 - → Hypertension
 - → Osteoarthritis
 - → Preventive Care
- Patient Experience of Care Survey:
 - → Appointment Access
 - → Continuity Of Care
 - → Communication
 - → Health Promotion
 - → Interpersonal Treatment
 - → Office Staff
 - → Integration Of Care
- Physician Practice Connections:
 - → Clinical Information Systems
 - → Patient Education Support
 - → Care Management

Moreover, from 2002 to 2005 Lumetra staff provided advanced survey design, implementation, analysis, and reports for two tasks and seven separate subtasks in our work with the Centers for Medicare & Medicaid Services (CMS). In addition, Lumetra, designed, implemented, and analyzed the surveys and reported survey results for a CMS national beneficiary complaint satisfaction program.



3.6 STRATEGIC PLANNING

Lumetra's staff developed and delivered focused, high-value consulting solutions in all of the **Strategic Planning** service areas sought by the State of Arizona.

- Analyze management systems
- Executive strategic planning
- Conduct focus groups

Lumetra's strategic planning consultants have experience facilitating executives and stakeholders in the development of visionary, conceptual, and directional strategic plans to stimulate organizational growth development and change. Our staff and consultants have direct experience evaluating management systems, and conducting executive strategic planning sessions and focus groups for Lumetra's own strategic plan as well as for:

- Apple Computer
- Chevron
- Cisco Systems
- Health Dimensions, Inc.
- Kaiser Permanente
- IBM
- Stanford Graduate School of Business
- University of California at San Francisco
- University of California at Berkeley

3.7 MEDICAL MANAGEMENT

While conducting the Doctor's Office Quality – Information Technology Project in California and nationally, Lumetra's staff have provided the **Medical Management** service areas sought by the State of Arizona in the Medical Management Consulting Request for Proposal.

- Review medical standard of care
- Research transplant programs
- Pharmacological issues

Through Lumetra's pioneering work as the national lead on the Centers for Medicare & Medicaid Services (CMS) Doctor's Office Quality – Information Technology (DOQ-IT) Special Study Project and the personal



experience of our Medical Management Consultants, Lumetra offers Arizona a cutting-edge range of proven solutions and competent services to meet healthcare organizations' specific needs.

Lumetra delivers:

- Technology adoption readiness
- Unbiased decision support for system selection
- Workflow and practice redesign consulting
- Functional requirements
- Implementation assistance
- Interoperability consulting
- Pay-for-performance and population-based reporting readiness

In the DOQ-IT project, Lumetra delivered not only a healthcare technology adoption curriculum, but the skills to directly support California's medical community in its goals to improve patient care, prepare for pay-for-performance initiatives, enhance patient safety, and develop population-based reporting capabilities.

In addition, Lumetra, Senior Medical Director for Medical Review, Dr. Mary Giammona developed and annually reviews the adult and pediatric transplant criteria for InterQual. She also recruited directors of the major bone marrow transplant centers in California to participate in a special study on review of breast cancer cases for possible transplant for Department of Health Services.

Lumetra's consultant Dr. Peter Kwok specializes in strategic consulting, clinical intervention, and pharmaceutical and group purchasing contracting. He is a highly sought advisor by managed care organizations and provider groups on drug utilization management strategy and the Medicare Modernization Act and Medicare Part D Programs. His expertise covers a wide spectrum of pharmacological areas, including injectable biologics, formulary and utilization management, specialty pharmaceuticals, and oncology/adjunctive drugs

3.8 HEALTHCARE RESEARCH

In its work for the Centers for Medicare & Medicaid Services (CMS) and the California HealthCare Foundation, Lumetra's staff of experts successfully fulfilled contract requirements and performance goals in the following areas:

- Research managed care
- Maximize federal funding
- Evaluate integrity of tools
- Analyze changes in eligibility and enrollment

Lumetra is a recognized expert in addressing issues related to healthcare quality, reliability, and integrity through research and analysis. Our clinical and analytic staff offers a wealth of experience in developing statistical procedures, conducting research design, data management and programming, performing data analysis, and developing and implementing data protection plans. Our Scientific Affairs Business Unit and Medical Affairs Department are composed of Ph.D.-trained biostatisticians and epidemiologists, as well as healthcare analysts, medical doctors, behavioral statisticians, and statistical programmers



skilled in the design, implementation, analysis, and evaluation of quality improvement projects in various settings.

In its activities as the Medicare Advantage Quality Improvement Organization Support Center (MA QIOSC), Lumetra developed and evaluated the integrity of national cultural competency assessment tools as well as provided technical assistance to Quality Improvement Organizations (QIOs) in those states where Medicare Advantage plans were available to beneficiaries. The services and solutions provided by Lumetra to QIOs throughout the nation include developing methodologies to assist managed care organizations with the design and implementation of effective quality improvement projects, as well as providing training and resource sessions fostering the development and utilization of best practices in quality improvement.

From 2002 to 2005 while successfully fulfilling the requirements of the Medicare Beneficiary Protection Quality Improvement Organization Support Center (MBP QIOSC) Lumetra developed and evaluated the integrity of all national tools used in case review initiatives including: interrater reliability, beneficiary satisfaction, mediation, and quality improvement plans (formerly known as corrective action plans.)

Lumetra's Viva la Vida project addressed the impact of diabetes on Latino Medicare as well as dually eligible Medicare/Medicaid beneficiaries. Viva la Vida, meaning "Live your life!", is a call to action signaling older Latinos and their families to take charge of their diabetes and live their lives to the fullest.



Lumetra's research and medical staff researched published data and recognized that racial and ethnic minorities have demonstrated lower utilization rates for preventive services. To address this disparity, Lumetra created Viva la Vida ("Live your Life!"), a special project focusing on the impact of diabetes on Latinos. Viva la Vida encouraged Latinos with diabetes to live fuller lives through awareness and greater self-management of the disease.

To be successful, the project had to overcome a challenging reality: on average, Latinos in California are twice as likely to have diabetes than Caucasians of similar age. Complicating matters, fewer Latino beneficiaries with diabetes obtain an annual A1C test than white beneficiaries.

Lumetra staff researched, developed, and validated the integrity of tools to effectively increase Latino awareness with regard to healthcare coverage and benefits. Barriers such as low literacy and ineffective provider-patient communication were promptly identified and successfully addressed through development, testing, validation, distribution, and



promotion of a range of bilingual low-literacy diabetes education materials.

As a result, the A1C testing gap between Latinos and whites dropped from a 7.2 percent gap in June of 2001 to 2.0 percent by June 2004. In the four Southern California counties Lumetra targeted for the Viva la Vida project (Los Angeles, Orange, Riverside, and San Diego), the annual A1C testing disparity also decreased from 9.6 percent in June 2001 to 3.0 percent in June 2004.

Between June 2001 and June 2004, annual A1C testing rates for Latino beneficiaries with diabetes increased by 14.8 percentage points in the four intervention counties compared to only 4.7 percentage points in 48 control counties not targeted for the Viva la Vida project.

Lumetra was engaged by the California HealthCare Foundation (CHCF) to investigate through analytical methods possible sources of healthcare variation that might explain the state's low ranking in quality of care indicators, and to conduct a more detailed analysis to identify potential causes for intrastate variation in healthcare quality. Primarily a data design and analysis effort, this project utilized Lumetra's database and data set expertise, especially as it related to Medicare beneficiary information. Lumetra conducted a comprehensive literature review and compiled data from multiple sources, including CMS Claim and Enrollment, United States Census Bureau, California Cancer Registry, and California Department of Services Mortality File.

The data design and analysis process involved:

- Identifying all available data sources and quantitative data elements that could provide information about disparities in quality of care
- Developing analytical plans for the analyses of quality indicator, hospitalization, stage of diagnosis, and mortality data
- Developing standard programs to be applied by all analysts to mortality and hospitalization data
- Drafting standardized report formats for each of three reports/chapters (geography, race/ethnicity, socioeconomic status) and a technical appendix
- Performing descriptive analyses of the 2000 Census data to identify data elements and appropriate socioeconomic status proxy measures for Medicare beneficiaries
- Generating statewide maps with population demographics and quality indicator rates displayed by county and by CMSA that highlighted differences and disparities by geographical region.



4. Conclusion

In closing, Lumetra is pleased to submit this proposal to perform Medical Management Consulting Services for agencies of the State of Arizona. As an organization with more than twenty years of experience improving the quality, safety, effectiveness, and integrity of healthcare, Lumetra is well positioned and committed to provide Arizona agencies with a wide range of timely and highly accurate medical management consultative services specifically designed to meet the unique needs of Arizona and its residents.



5. Exhibit A – References

Letters on the following pages from:

- Centers for Medicare & Medicaid Services
- California Academy of Family Physicians
- Pacific Business Group on Health

DEPARTMENT OF HEALTH & HUMAN SERVICES

CENTERS FOR MEDICARE & MEDICAID SERVICES
WESTERN CONSORTIUM
DIVISION OF QUALITY IMPROVEMENT



July 13, 2005

To whom it may concern:

I am pleased to offer this letter of reference for Lumetra. I have worked with the Quality Improvement Organization program for a number of years and Lumetra has always been able to provide highly qualified medical review staff. CMS requires certified, credentialed, and experienced physicians to perform the work we have contracted to Lumetra. Not only has Lumetra staff been highly qualified, but their performance to contract standards has always been exemplary. We have confidence in the quality of their work and their ability to recruit such individuals has over the years has proven successful to our needs. If you need further clarification, please feel free to contact me. I can be reached via email (Tina Dickerson@cms.hhs.gov) or by phone at 206-615-2319. Thanks

Sincerely.

Tina M. Dickerson Project Officer

Division of Quality Improvement

Seattle Regional Office



Reference 1: Centers for Medicare & Medicaid Services

1. QIO - 7th Scope of Work (SOW)

Contract and Task Order Number 500-02-CA02

Contract Type Cost Plus Fixed Fee and Award Fee
Period of Performance November 1, 2002 – October 31, 2005

Total Contract Value \$74,673,280.00

Contract Description

Under this contract with the Centers for Medicare & Medicaid Services (CMS), in the 7th SOW Lumetra was contracted to work with consumers, physicians, hospitals, and other caregivers to refine the delivery of healthcare in California to make sure patients get the right care at the right time, particularly among underserved populations. Lumetra, as the Quality Improvement Organization (QIO) for California (November 2002 – October 2005), is also contracted to safeguard the integrity of the Medicare trust fund by ensuring payment is made only for medically necessary services, and investigate beneficiary complaints about quality of care. Contracted tasks required Lumetra:

- Task 1: Improving Beneficiary Safety and Health through Clinical Quality Improvement in six settings (i.e., nursing home, HHA, hospitals, physician offices, underserved and rural beneficiaries, Managed Care Organizations [MCO])
- Task 2: Improving Beneficiary Safety through Information and Communication and other Mandated Communications Activities
- Task 3: Improving Beneficiary Safety and Health through Medicare Beneficiary Protection Activities, including Beneficiary Complaint Review, Hospital Issued Notice of Non-Coverage (HINN), Notice of Discharge and Medicare Appeal Rights (NODMAR), federal Emergency Medical Treatment and Active Labor Act (EMTALA), Higher Weighted Diagnostic Related Groups (DRG), Post Payment, Hospital Payment Monitoring Program (HPMP), and other Case Review Activities and Post Review Activities
- Task 4: Improving Beneficiary Safety and Health Through Development Activities through the Medicare Beneficiary Protection Quality Improvement Organization Support Center (MBP QIOSC), Medicare Advantage (MA) Quality Review Organization (MAQRO), Doctor's Office Quality (DOQ), MA Quality Improvement Organization Support Center (MA QIOSC), Doctor's Office Quality Information Technology (DOQ-IT) and HPMP Prevention of Unnecessary One-Day Admissions

Contracting Officer/Contact Person Naomi Haney-Ceresa, CMS

Subcontractors

Address and Telephone 7500 Security Boulevard Mail Stop C2-21-15

Baltimore, MD 21244-1850

410.786.1607

Program Manager and Telephone Tina Dickerson, CMS, Project Officer

206.615.2319

Lumetra Key Personnel and Jo Ellen H. Ross, President & CEO, Lumetra

Linda Sawyer, COO, Lumetra

Subcontractors: n/a



July 18, 2005

To whom it may concern:

On behalf of the California Academy of Family Physicians, I am pleased to offer this letter of reference for Lumetra. We have worked with Lumetra, the Quality Improvement Organization for California, for a number of years, most recently as a supporter of the Doctors' Office Quality-Information Technology (DOQ-IT) project.

Lumetra has always been able to provide highly experienced quality improvement and medical review staff. Lumetra brings certified, credentialed, and experienced physicians and clinical staff to perform the work for which they are contracted to complete. Not only has Lumetra staff been highly qualified, but their performance has always been exemplary.

We have confidence in the quality of their work, and their ability to recruit such individuals has over the years proven to meet our needs. The California Academy of Family Physicians is lucky to have Lumetra for a partnership in a four-year initiative addressing clinical excellence in diabetes care and practice re-design. If you need further clarification, please feel free to contact me. I can be reached via email at shogeland@familydocs.org or by phone at 415-345-8667.

Sincerely,

Susan Hogeland, CAE Executive Vice President

1520 Pacific Avenue Sno Francisco, CA 94109-2627 Tel 415 345 8667 Fax 415 345 8668 Email CAFP@FamilyDoos.org Web http://www.FamilyDocs.org

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Reference 2: California Academy of Family Physicians

2. Doctors Office Quality – Information Technology (DOQ-IT) Project

Contract and Task Order Number 500-02-CA02 Mod. CA0010

Contract Type Cost Plus Fixed Fee

Period of Performance September 8, 2003 – September 7, 2005

Total Contract Value \$5,567,761.00

Brief Contract Description

Lumetra was contracted to promote the adoption of electronic health record (EHR) systems and information technology (IT) in small-to-medium sized physician offices with a vision of enhancing access to patient information, decision support, and reference data, as well as improving patient-clinician communications. This two-year project was designed to improve quality of care, patient safety, and efficiency for services provided to Medicare beneficiaries, by promoting the adoption of EHR and IT in primary care physician offices.

As the lead QIO, Lumetra provides project leadership and support to participating QIOs for the purpose of improving the efficiency, clinical quality, and safety of care provided to Medicare beneficiaries. This involves developing highly specialized model strategies and approaches that will be used by participating QIOs to successfully achieve the following project goals:

Lumetra was the responsibilities for the following:

- ➤ In conjunction with the California Academy of Family Practice recruit 100-200 physician offices statewide, or approximately 1,000 physicians, to adopt and implement IT interventions
- Provide assistance to physicians in re-organizing physician/office workflow to integrate and optimize use of IT
- Undertake local initiatives to promote adoption and use of IT
- Provide ongoing assistance to physicians regarding how to change office work processes to utilize IT in improving quality, safety, efficiency, and cost in managing patients, including those with chronic disease

Contracting Officer/Contact Person Address and Telephone	Naomi Haney-Ceresa, CMS 7500 Security Boulevard Mail Stop C2-21-15 Baltimore, MD 21244-1850 410.786.1607
Program Manager and Telephone	Tina Dickerson, CMS, Project Officer
	206.615.2319
Lumetra Key Personnel and Subcontractors	Linda Sawyer, COO, Lumetra
	John Weir, Project Manager, Lumetra
	Subcontractors:
	 Arkansas Foundation for Medical Care
	Massachusetts Peer Review Organization, Inc.
	HealthInsights of Utah



Pacific Business Group on Health 221 Main Street Suite 1500 San Francisco CA 94105 www.pbgh.org www.healthscope.org Tel: 415.281.8660 Fax: 415.281.0960

Tel: 415.281.8660 To whom it may concern:

I am pleased to offer this letter of reference for Lumetra. We can recommend Lumetra to the State of California for medical review services. The Pacific Business Group on Health has worked with Lumetra, the Quality Improvement Organization for California, over the years and their work has always been excellent. In our experience, Lumetra's clinical and administrative staff has been uniformly well certified to perform the work at hand. Not only is Lumetra's staff well qualified and trained, they have always acted with professionalism and integrity. We have confidence in the quality of their work and feel comfortable recommending the organization to you. If you need further clarification, please feel free to contact me. I can be reached via email dhopkins@pbgh.org or by phone at 415-281-8660.

Sincerely;

David Hopkins, PhD

Director

Quality Measurement and Improvement

Pacific Business Group on Health

Cc: Michael Patrick



Reference 3: Pacific Business Group on Health

3. Physician Efficiency Analysis

Period of Performance July 1 2004 – September 30 2004

Total Contract Value \$29,573.00

Contract Description

Lumetra was contracted by the Pacific Business Group on Health (PBGH) to process healthcare claims data through efficiency analysis software, validated the data for accuracy, perform concatenation of data files to enable processing of one combined data file. In addition, Lumetra staff performed technical mapping of the data, formatted native data values to the format required by the analysis software, and prepared reports.

Contact Person David Hopkins

Address and Telephone Pacific Business Group on Health

221 Main Street, Suite 1500 San Francisco, CA 94105

415.281.8660

Lumetra Key Personnel and Susan Merrill, Dir. Scientific Affairs

Subcontractors Subcontractors: n/a